January 2020

Data to Care

CAREWare 6 Overview

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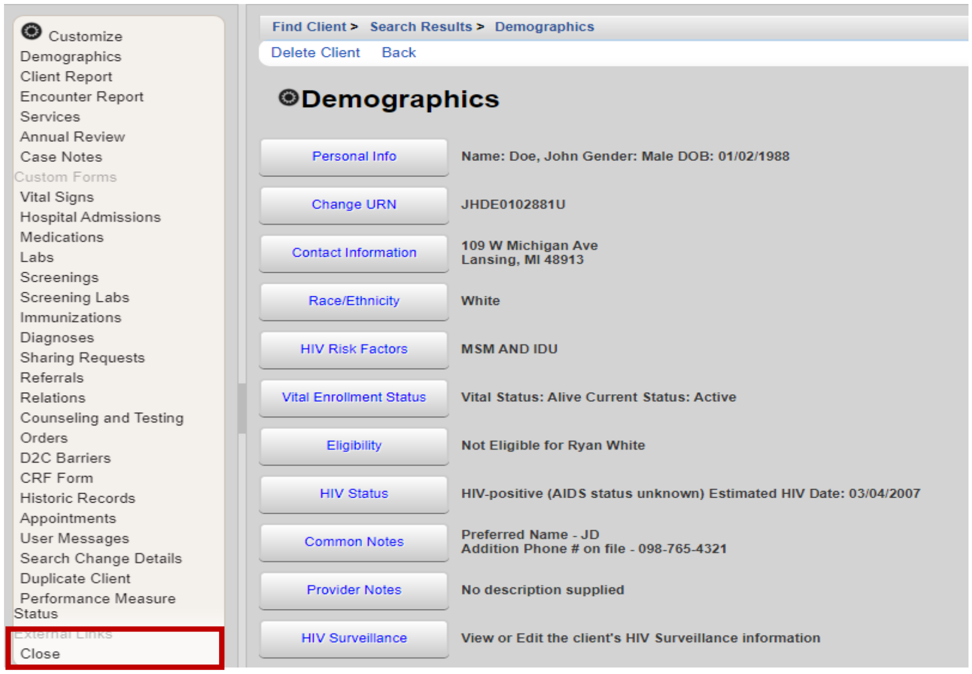
Disclaimer: No real client data was used in creating this handout. All client information in this handout has been created specifically for training purposes.

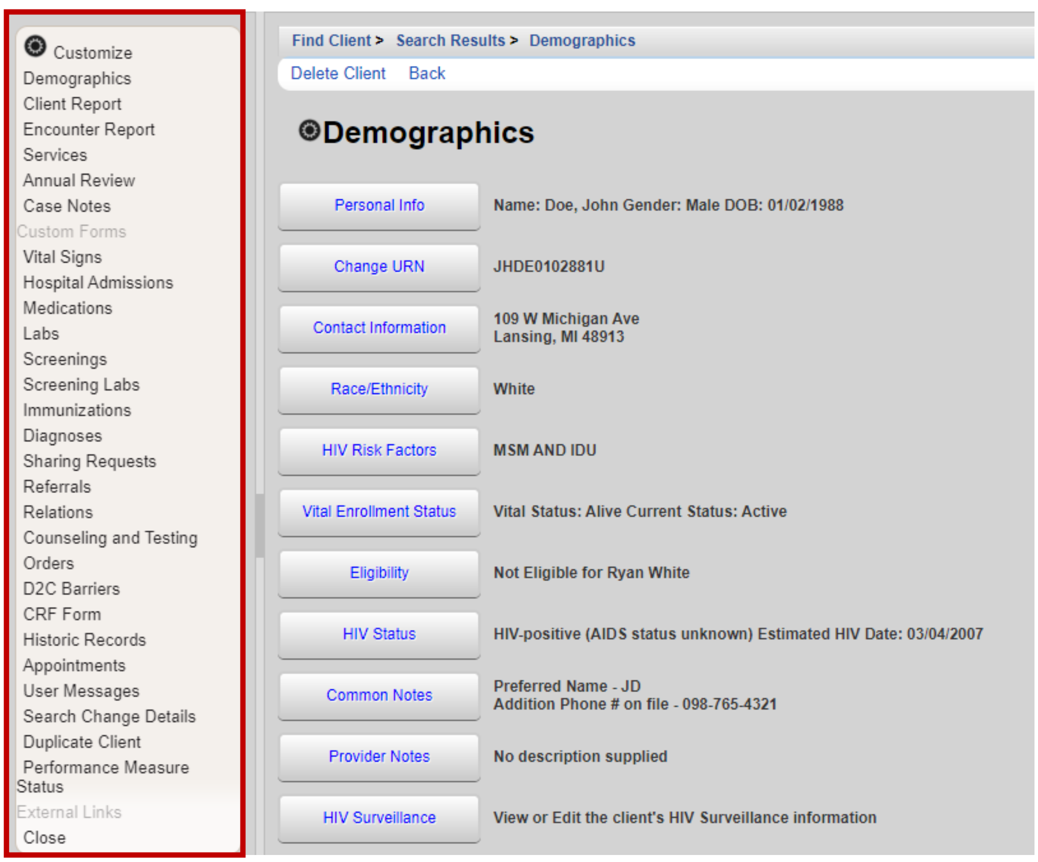
What You Need to Know About CAREWare 6

CAREWare 6 is different than CAREWare 5 in many ways. Here are some things you need to know:

1. When you open a client record, it will open a new tab on your browser. Make sure you close the record after entering in all necessary information. If you don't, it will keep the record open in that tab even if you move on to a new client.



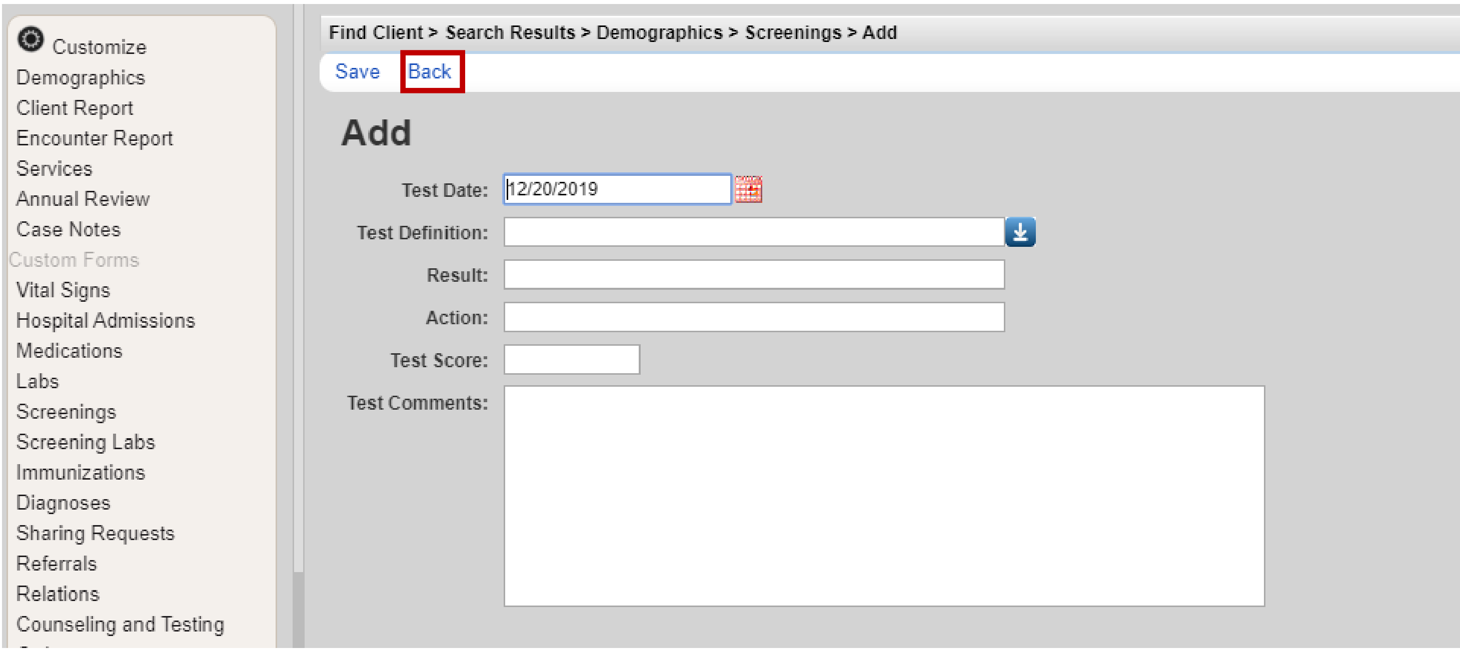
2. You navigate the client's record through the menu options located on the left-hand side of the record. When you want to move from one tab to the other, simply click the tab on the left-hand side. It will take you to that tab. For example, if you want to add a case note, click it.



What You Need to Know About CAREWare 6 Continued....

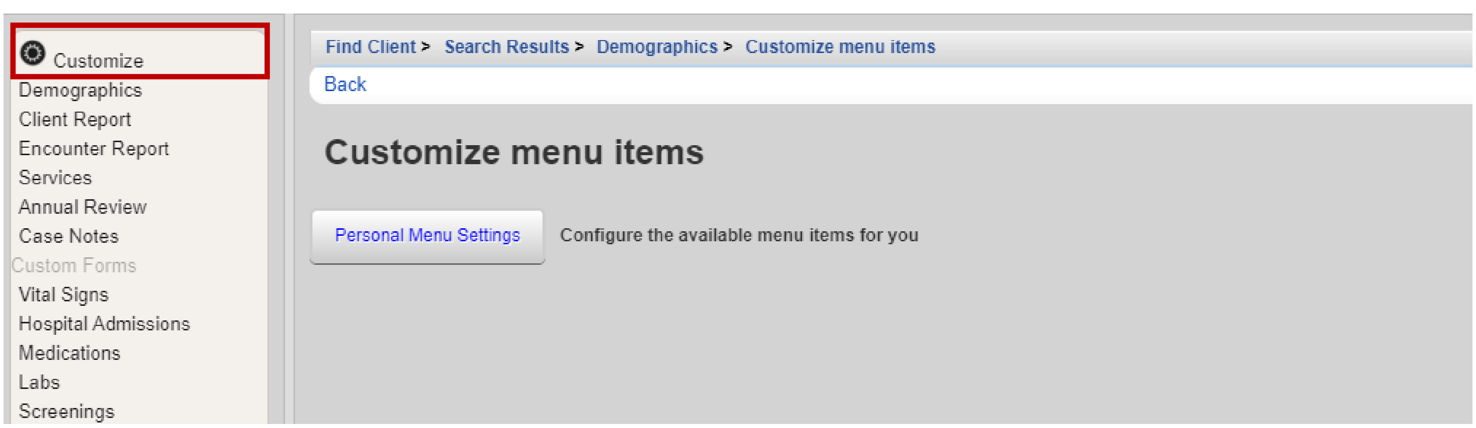
3. If you are in the middle of adding any record, whether it is a service, lab, etc., you will not be able to access anything else. For example, if you are in the middle of adding a screening lab and want to add a service, you must either:

    1. Add the current record and save it

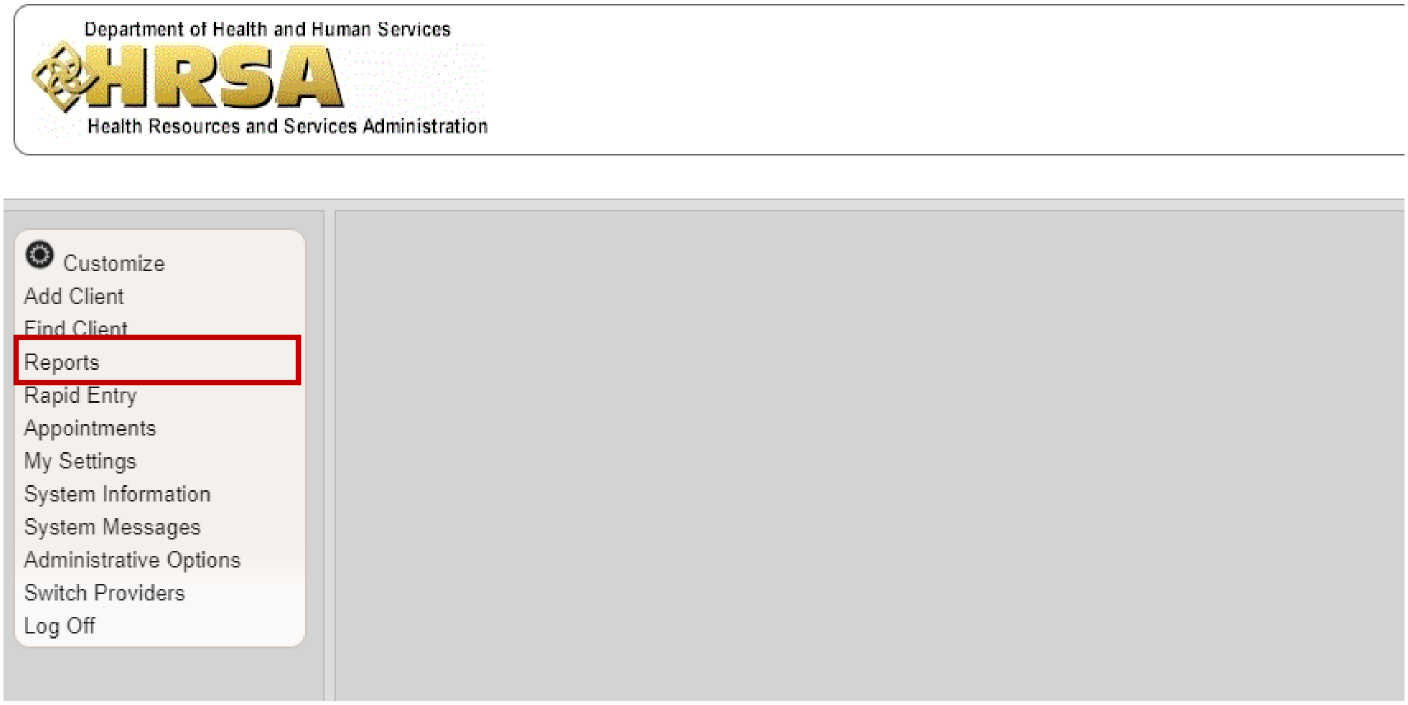


If you try to access the menu on the left-hand side without doing one of the two things listed above, nothing will happen.

4. The **Customize** link allows you to configure the available menu items you see on the left-hand side. **It is <u>not recommended</u> to customize the menu;** instead, leave all of the options available. That way, you don't have to worry about leaving out a menu item that you may need in the future.



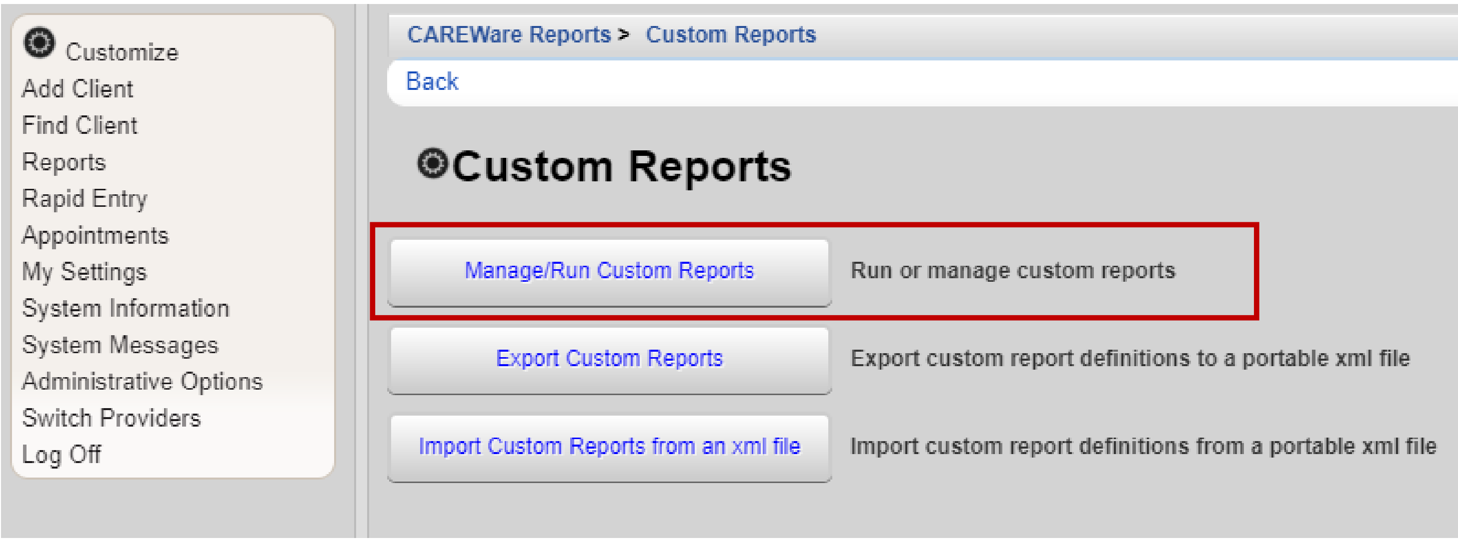
Pulling Not In Care List



1. Select **Reports** from the agency home page
2. Select "Custom Reports" from the CAREWare Reports page as directed below

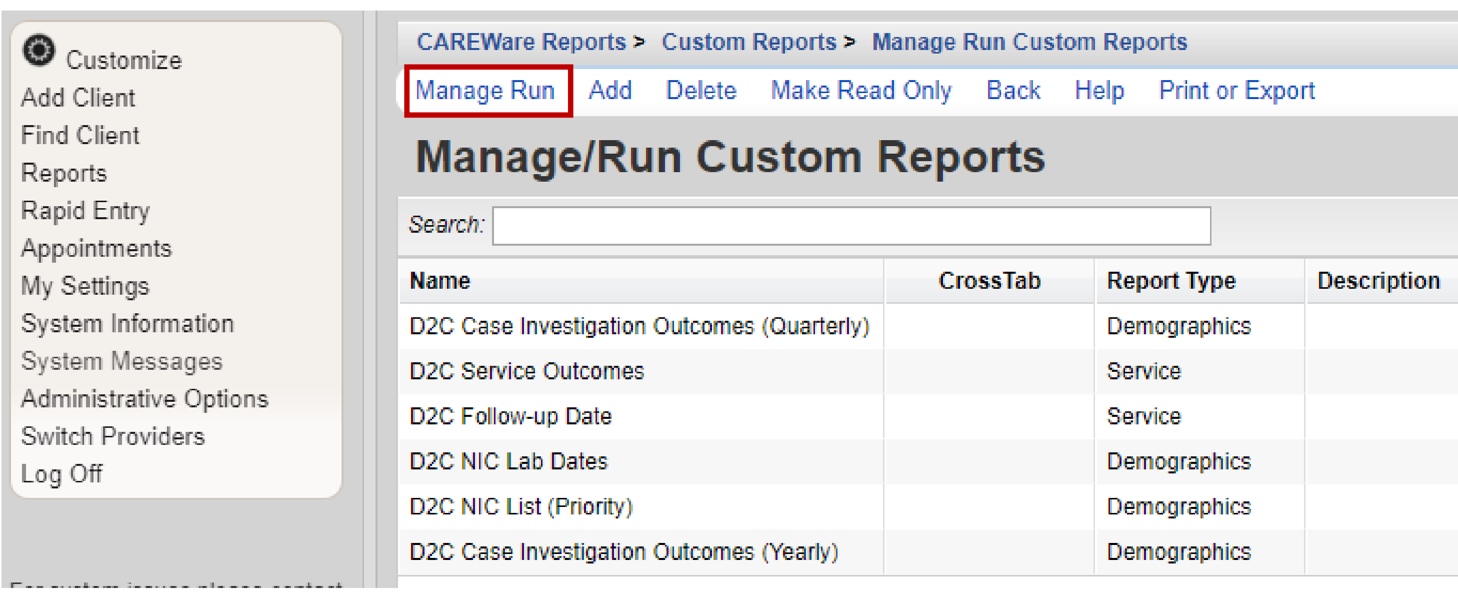
Pulling Not In Care List Continued

3. Select **Manage/Run Custom Reports**



4. Once new page opens, select **D2C NIC List (Priority)** options from this list of custom reports.

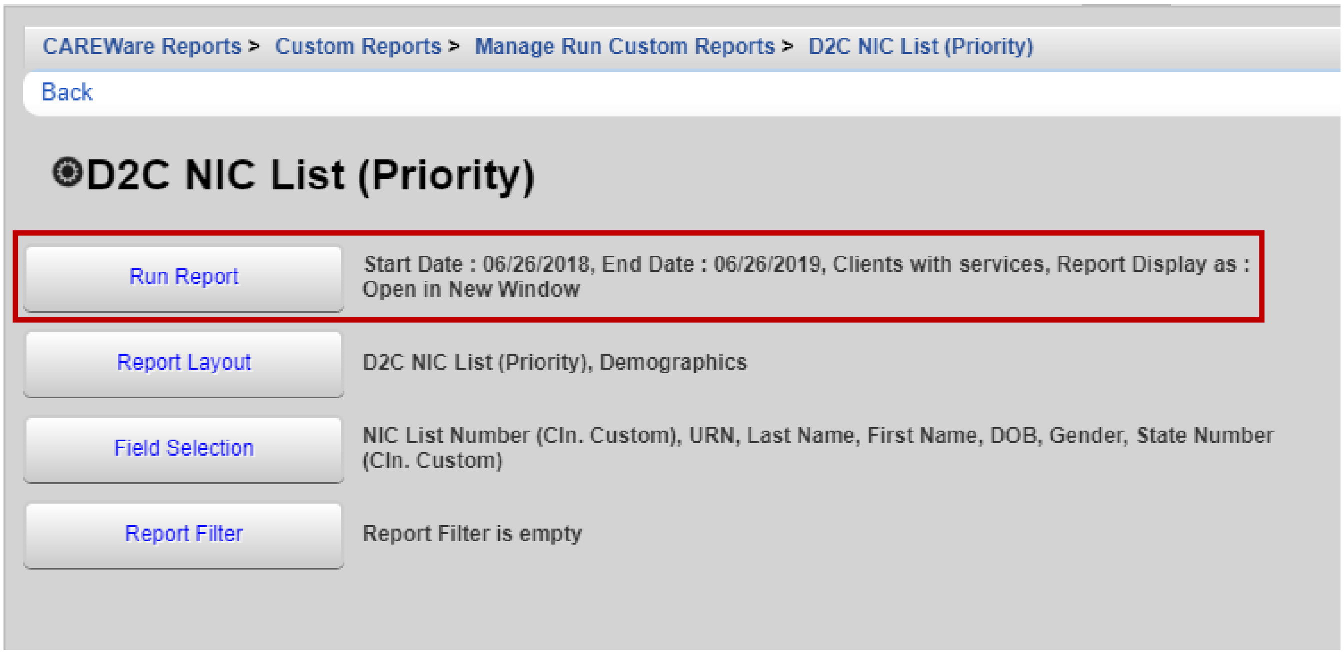
5. When "D2C NIC List (Priority) is highlighted, select **Manage Run**



Note: To learn about the other D2C Custom Reports, please go to page ______

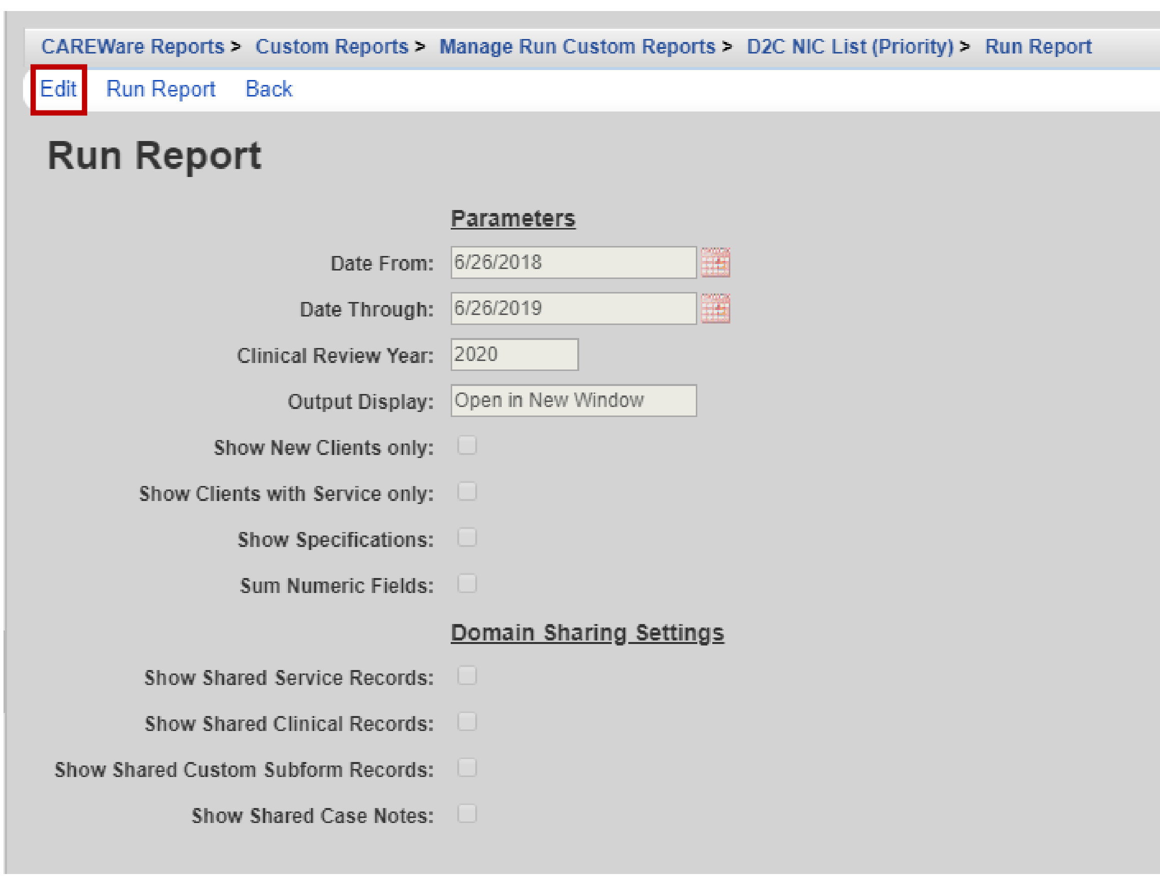
Pulling Not In Care List Continued

5. Select **Run Report**



6. Check the Date Range and Output Display

7. If you need to change them, select **Edit** from the top menu bar



Pulling Not In Care List Continued

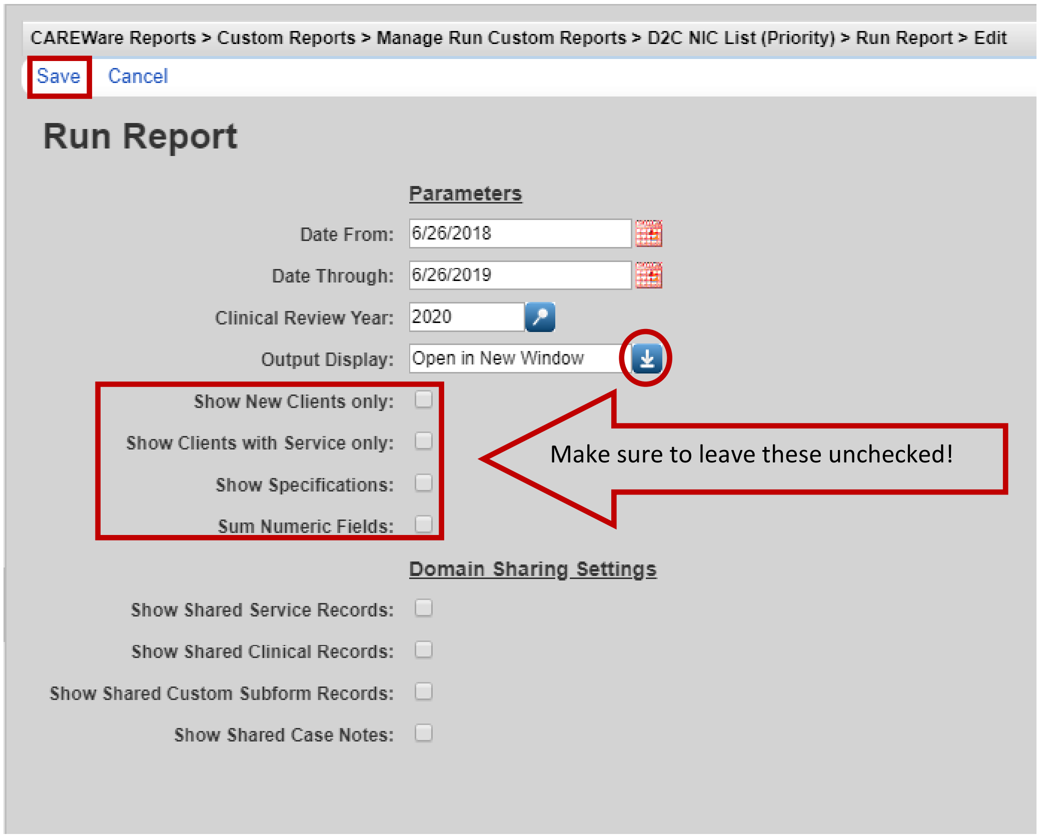
8. Change the Date Range for the time you are looking for

9. Change the Output Display to what you are looking for. Options are:

    A. Open in New Window

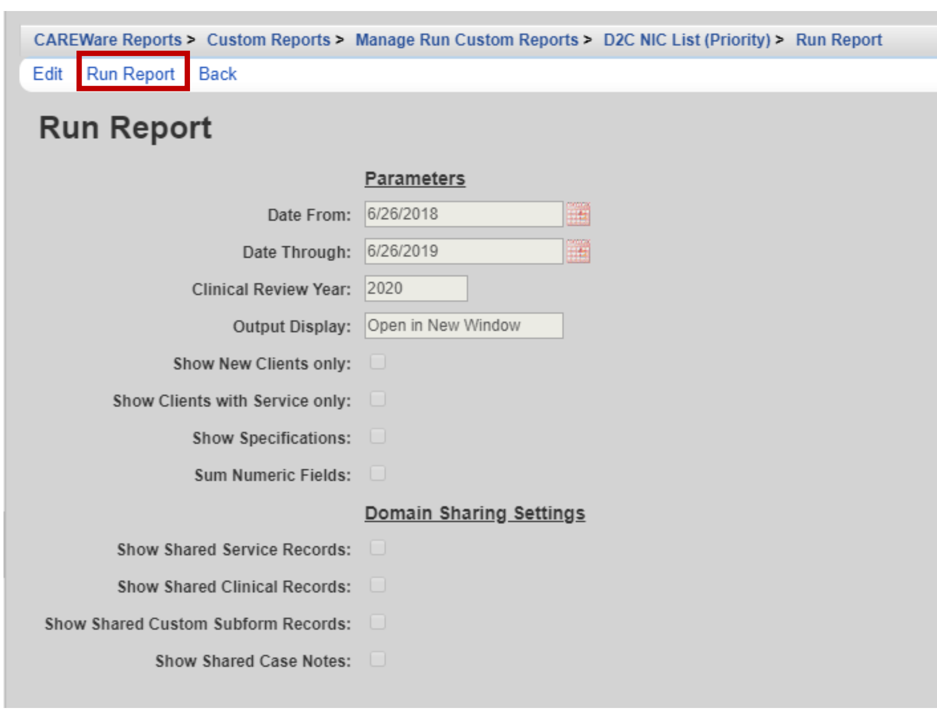
    B. Download as CSV (excel)

    C. Open as PDF



10. **Save**

11. Select **Run Report**

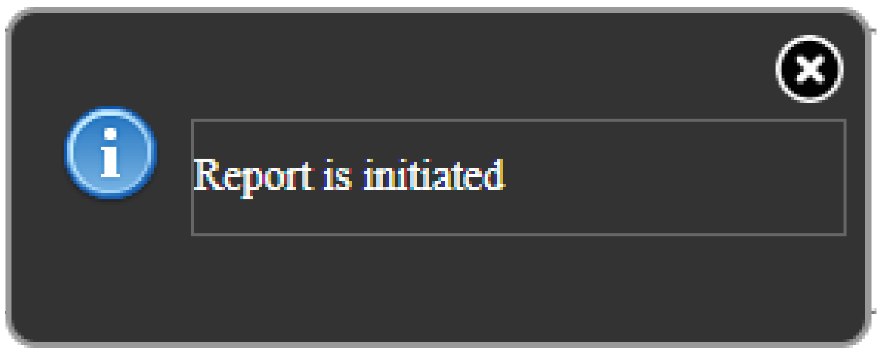


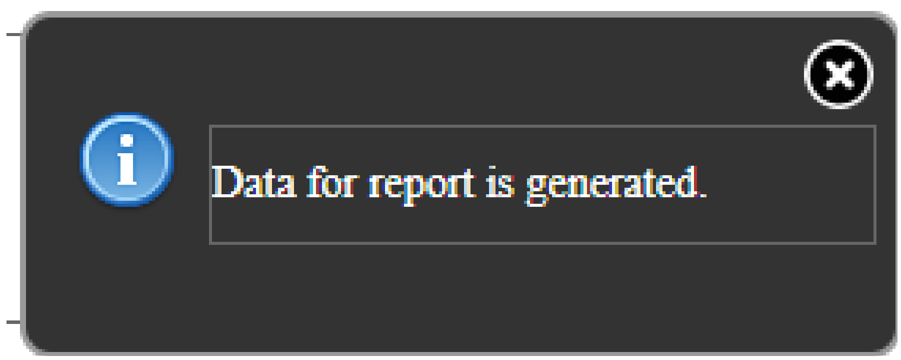
Pulling Not In Care List Continued

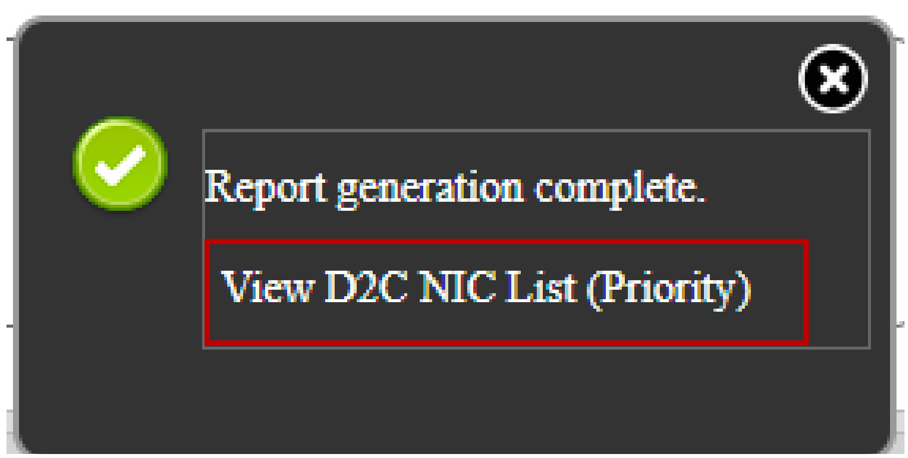
While the report is generating, you will see the following series of notifications on the top right side of your screen

Once the Report generation is completed, you will see the third and final box.

Click on the **View D2C NIC List (Priority)** link to pull up your NIC List



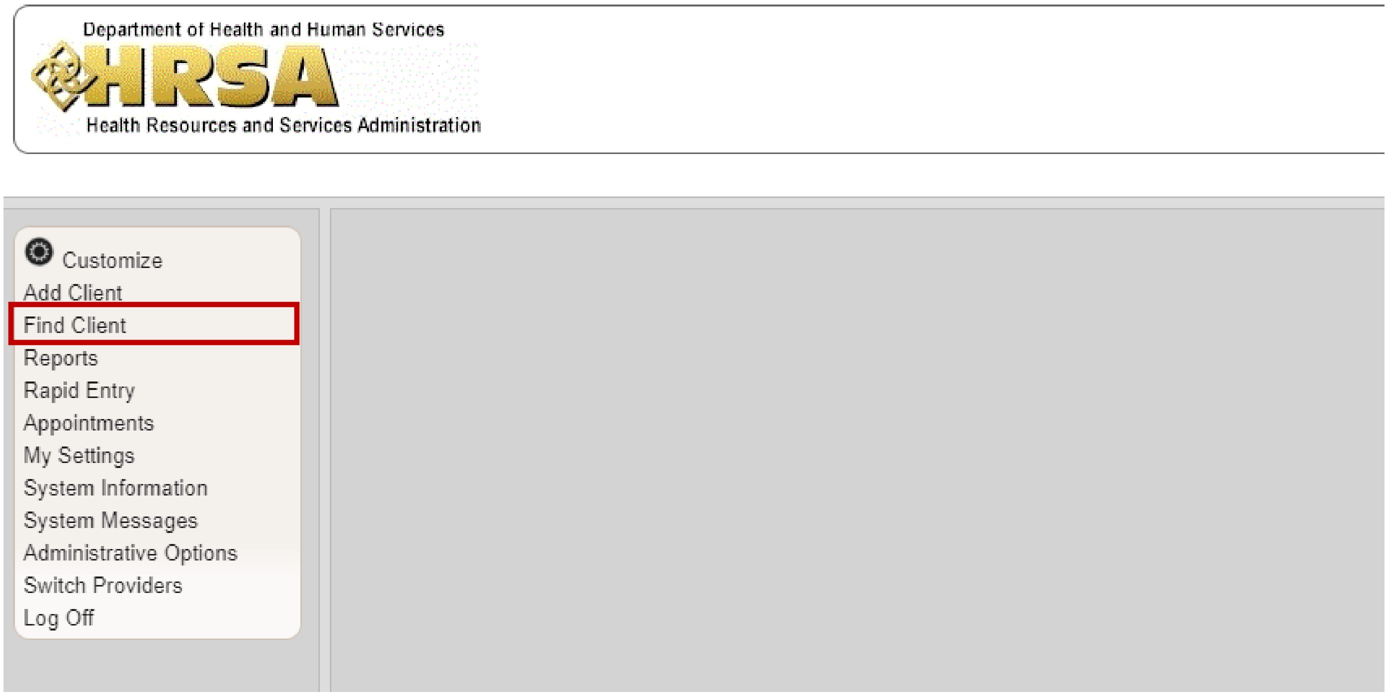




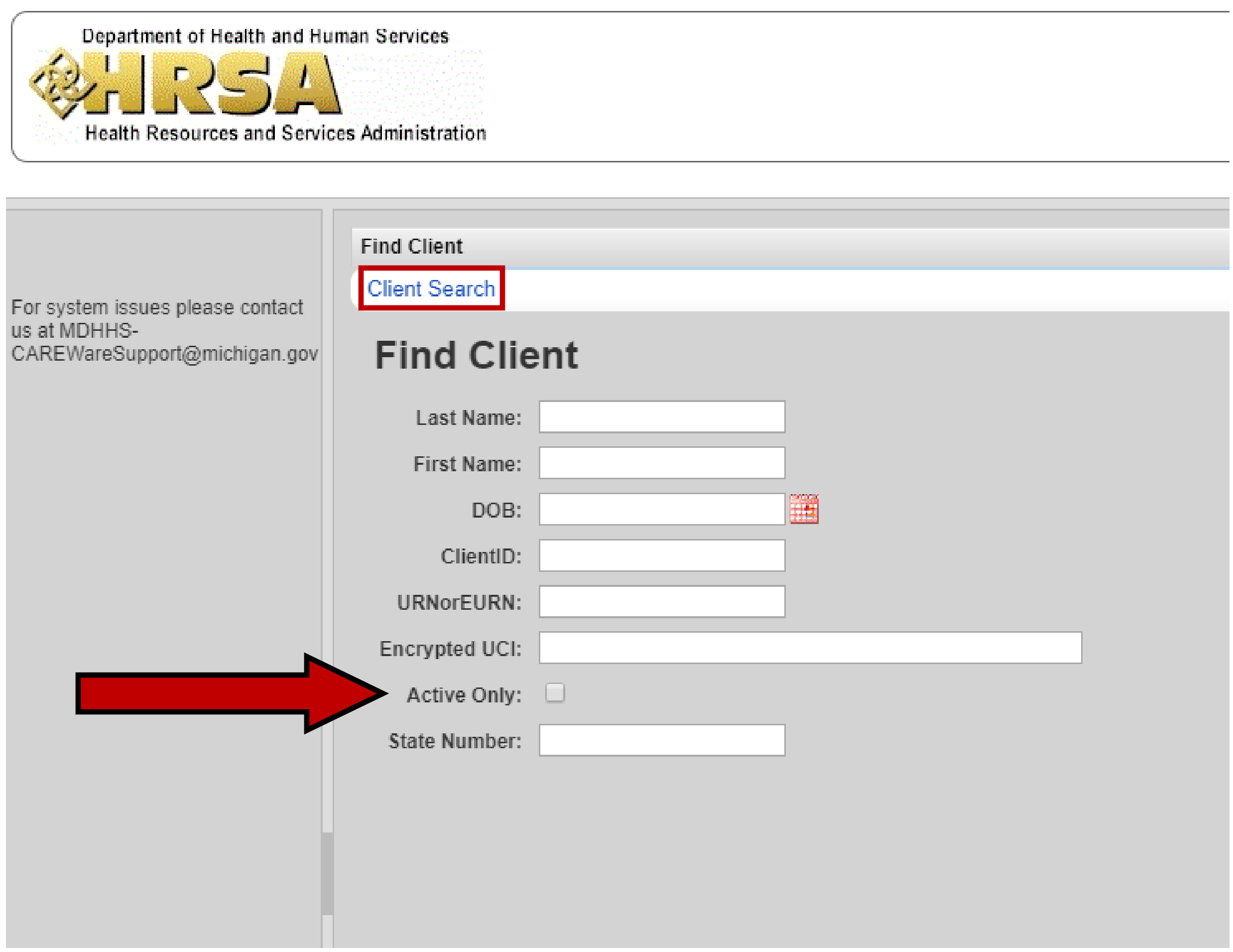
Put example and screen grabs of a sample Nic list would look like when pulled

How To Find a Client

1. Select **Find Client.**



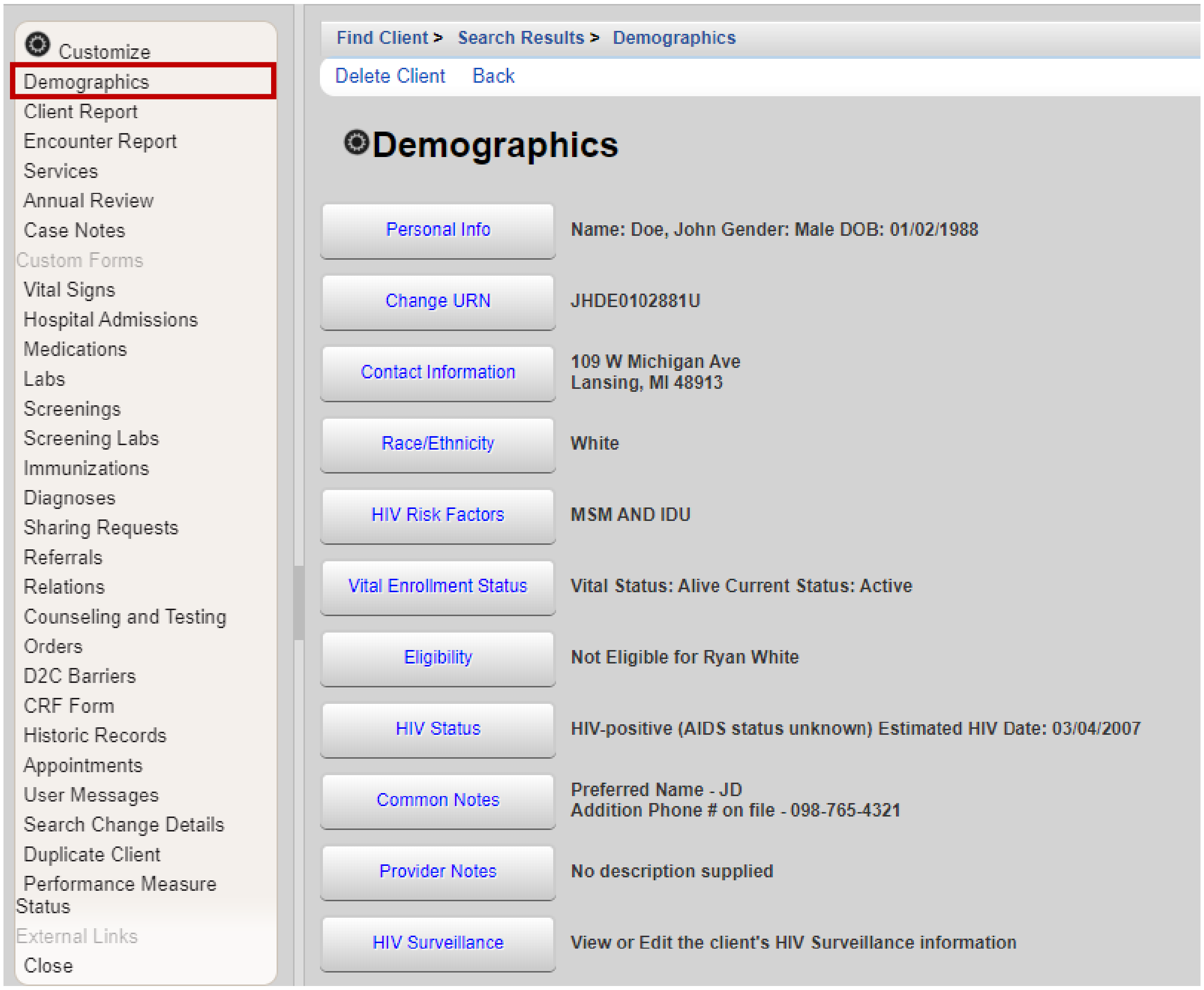
2. A new tab will open. Enter the Last Name and First Name, or Client ID/URN.
3. Select **Client Search.**



Note:

For Data to Care, make sure the "Active Only" box is **unchecked** to view all of your clients regardless of enrollment status.

This is the Demographics Page—Main Page

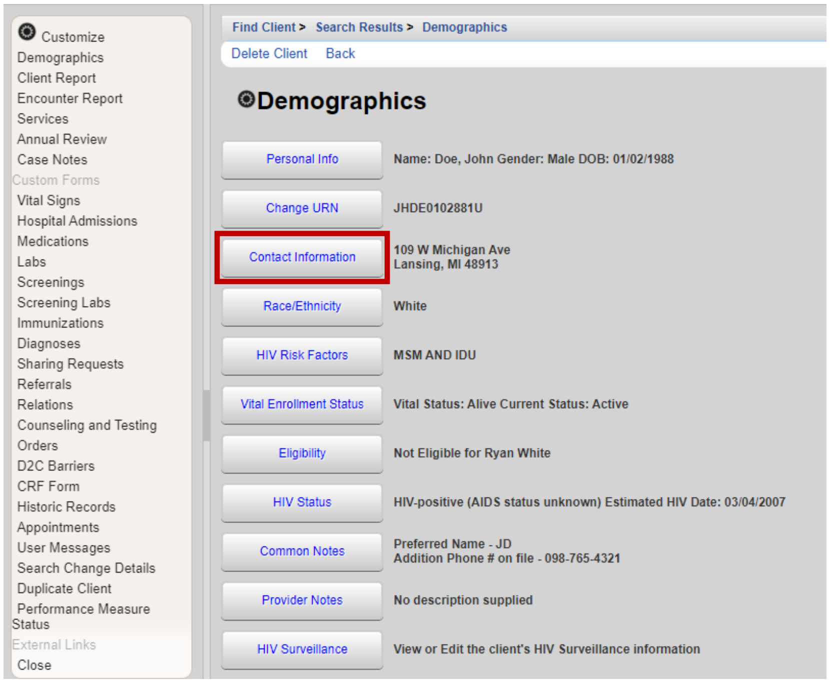


This page holds all of the basic client information. Here are a few things you need to know:

- In order to add any records (such as Race/Ethnicity, HIV Risk Factor, or Contact Information) you must click the blue lettered tabs of the category you wish to edit (located in the middle of the page).
- All information on the demographic page is displayed next to the blue lettered tabs.
- Common notes are not permanent and can be viewed, edited, or deleted by anyone who has access to the client record. Therefore, common notes should only be used when it is something you want everyone to know about the client. If you want to enter something that will be permanently saved in CAREWare or is personal to the client, then enter it into **Case Notes**.
- Everything on the demographics page—with the exception of custom tabs, eligibility status, case notes, enrollment date and status—is shared with other providers that are also providing services to the client and can be changed by those providers.
- Custom tabs are now located on the demographics page.
- The left-hand side is how you will navigate all of the tabs of the client's record.

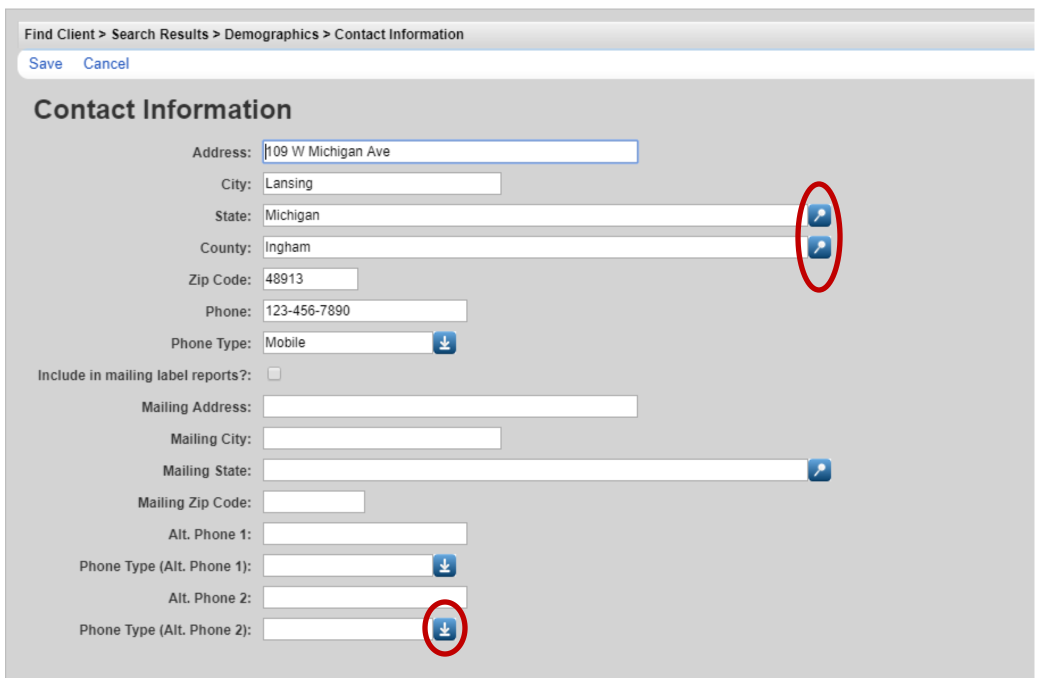
How to Add/Edit Information to the Demographics Page

1. From the main page, you can add, view, and edit various demographic information. To add or edit information, click the blue lettered tab of the category you wish to view or edit.



2. The tab will open. Enter or edit all relevant information.

3. **Save.**



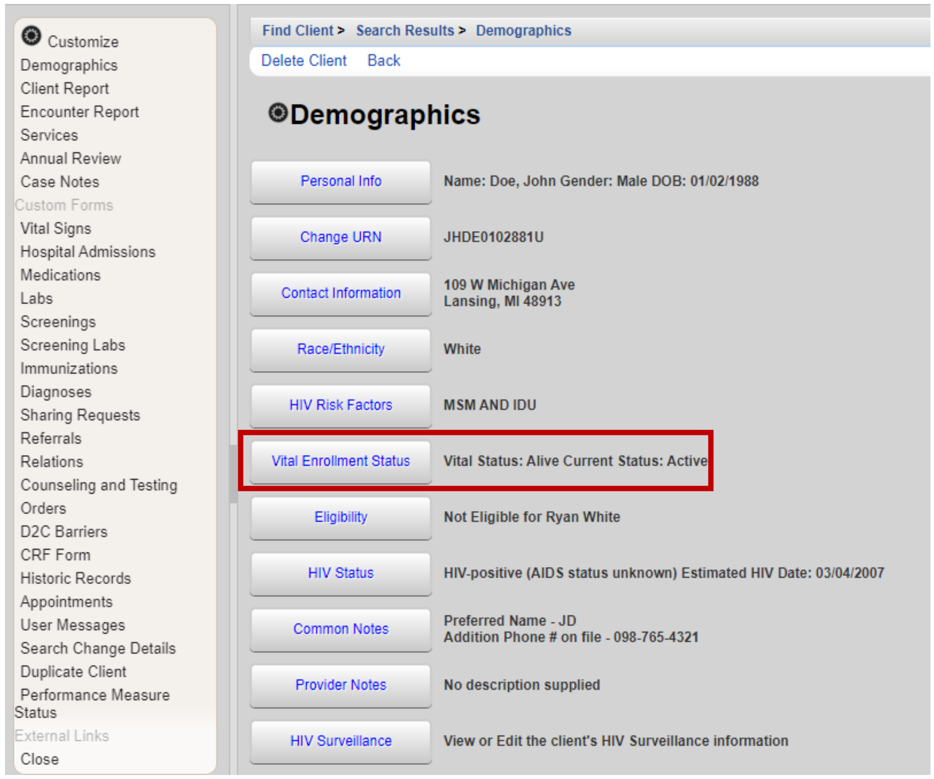
Note: Some information has to be entered using a drop down menu. If a category has a drop down menu next to it,  you must choose from the list provided.

After you save, you will be taken back to the main page. You can view and edit other categories by clicking the blue tab of the category you wish to view and follow the same instructions. Some categories will require you to enter data while others will require you to check the appropriate box.

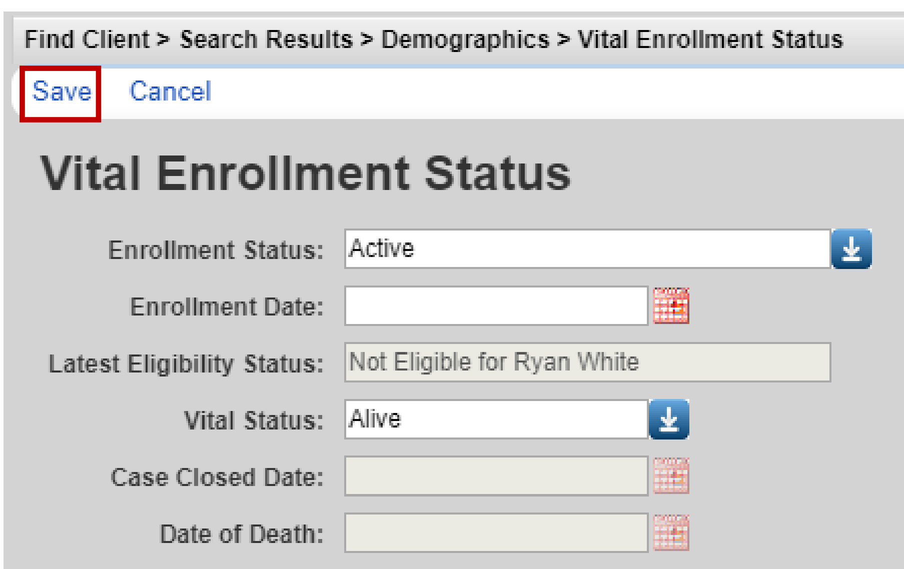
How To Edit Enrollment Status

When a client is added to CAREWare, the enrollment status will automatically be **Active** and vital status will be **Alive.** However, that information could change for people on your NIC List. The client may have been discharged from an agency or become inactive. You will need to add a record to reflect that. If enrollment or vital status changes, follow these instructions:

1. Open a client record. Enrollment Status is located on the demographics page.
2. Select **Vital Enrollment Status.**



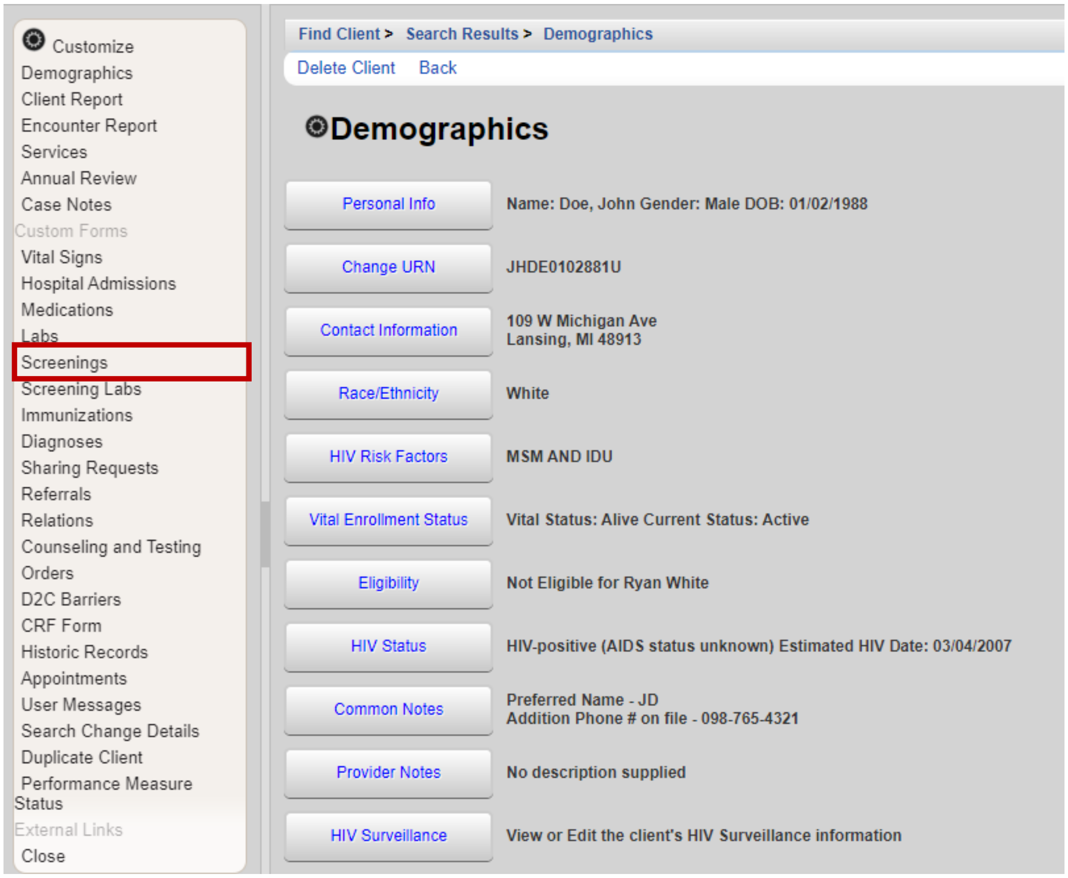
3. Enter the NEW Enrollment or **Vital Status.** Choose from the dropdown menu.
4. **Save.**



Note: When you change enrollment status from active, you will be prompted to enter a **Case Closed Date.** You will also be prompted to enter a **Date of Death** if you change vital status to deceased.

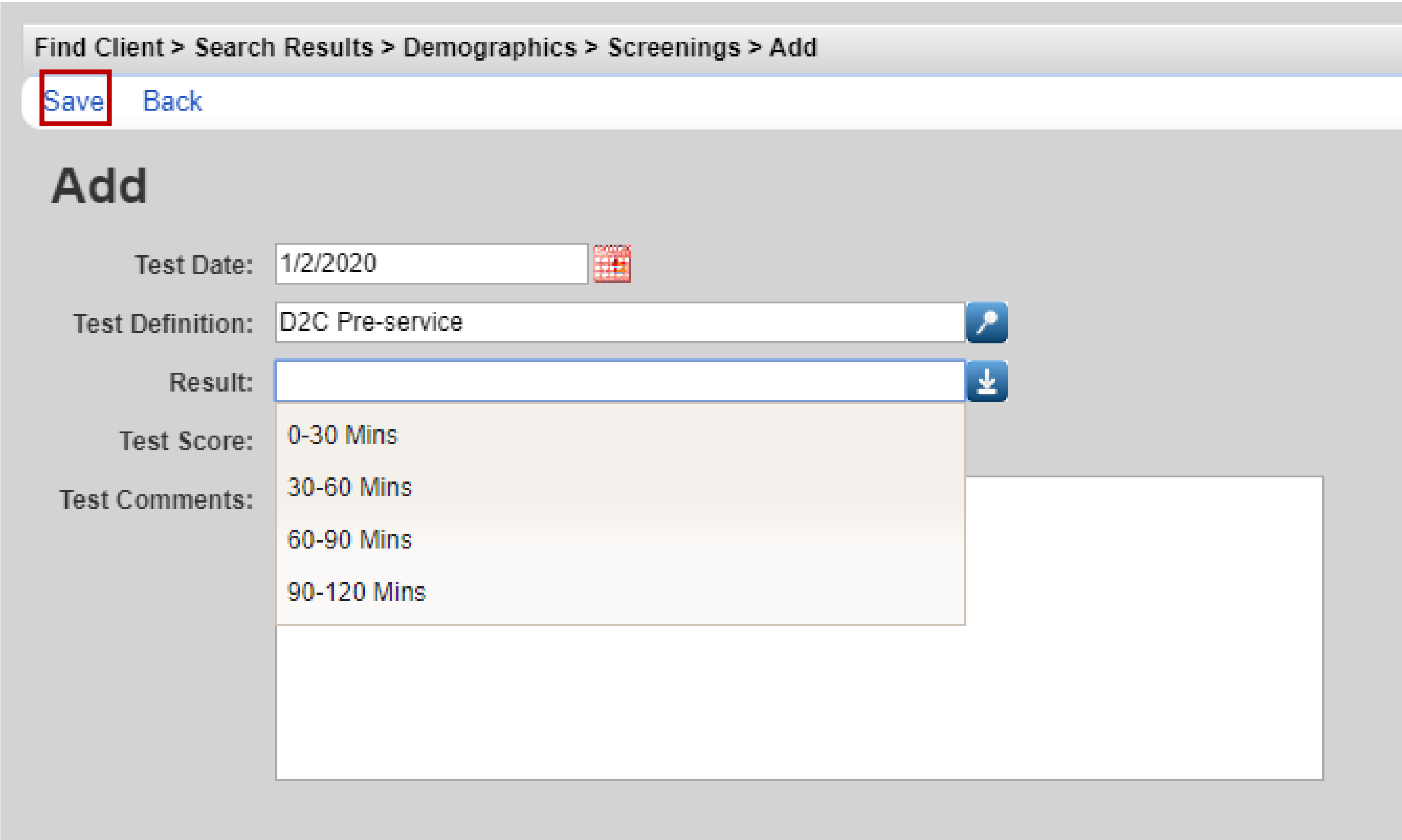
Pre-Service Investigation

1. To record all of your Pre-Investigation time in CAREWare and other places that you explore (TLO, MDSS), select **Screenings** on the menu bar on the left side of the page.



2. Select **Add**

Pre-Service Investigation Continued



3. Make sure you have the correct date of the pre-investigation screening

4. Select **D2C Pre-Service** from the dropdown box on the **Test Definition** line

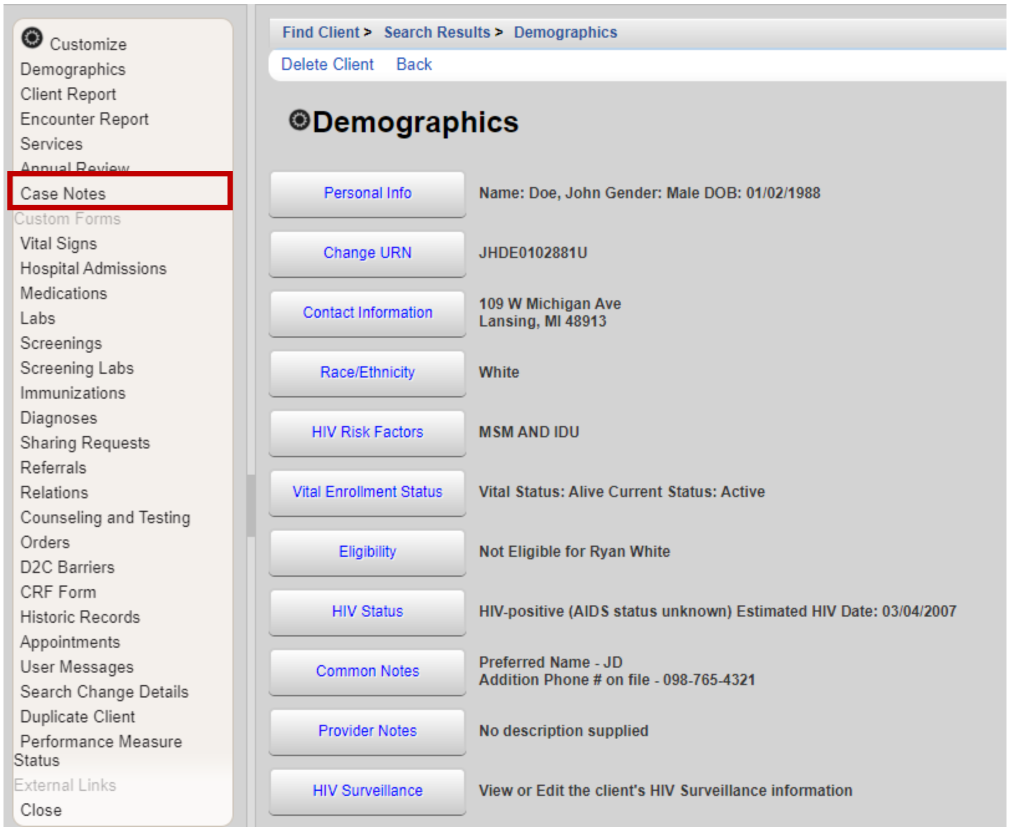
5. Choose the timeframe you spent doing pre-investigation services from the **Results** line

6. Please enter in the comment box what services you conducted

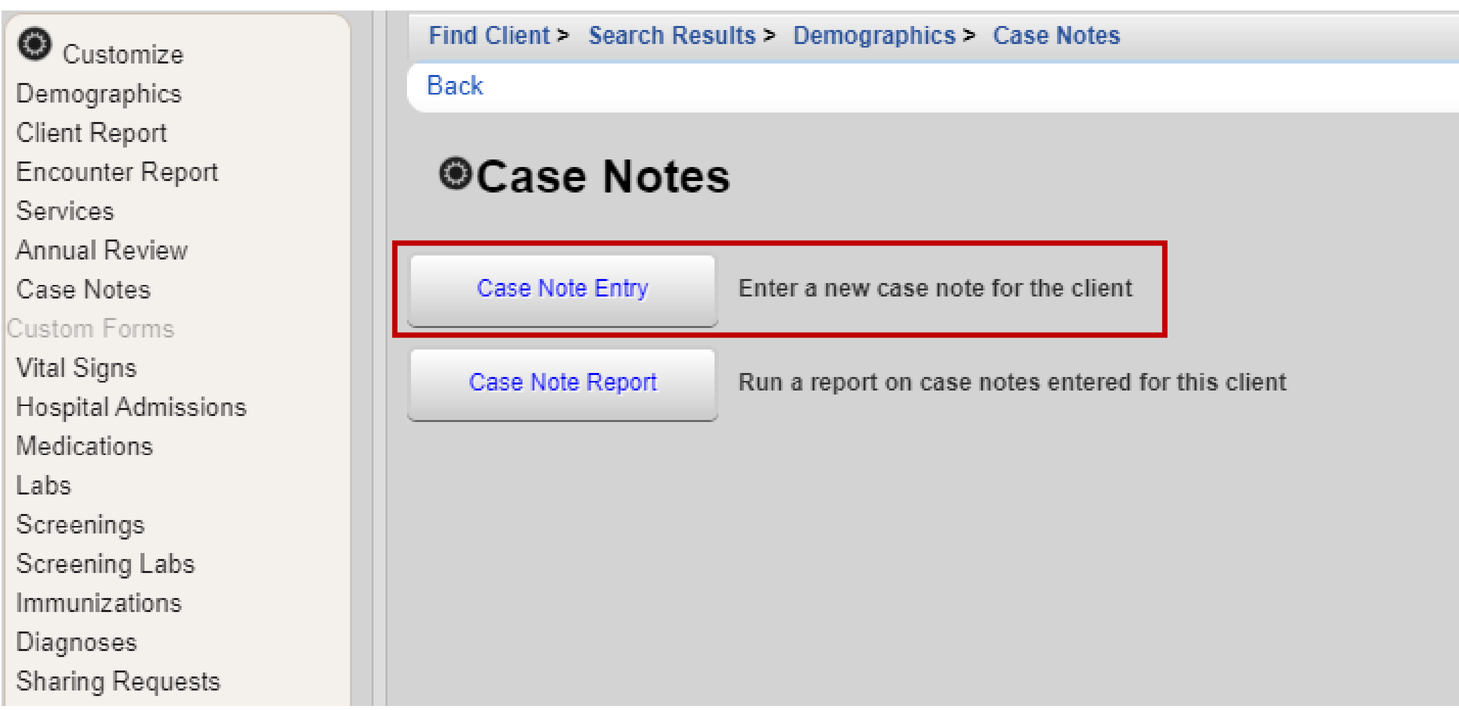
7. Be sure to click **Save** on the menu bar when completed

How To Add Case Notes

1. Open the client record.
2. Select **Case Notes** from the menu of links on the left-hand side of the record.

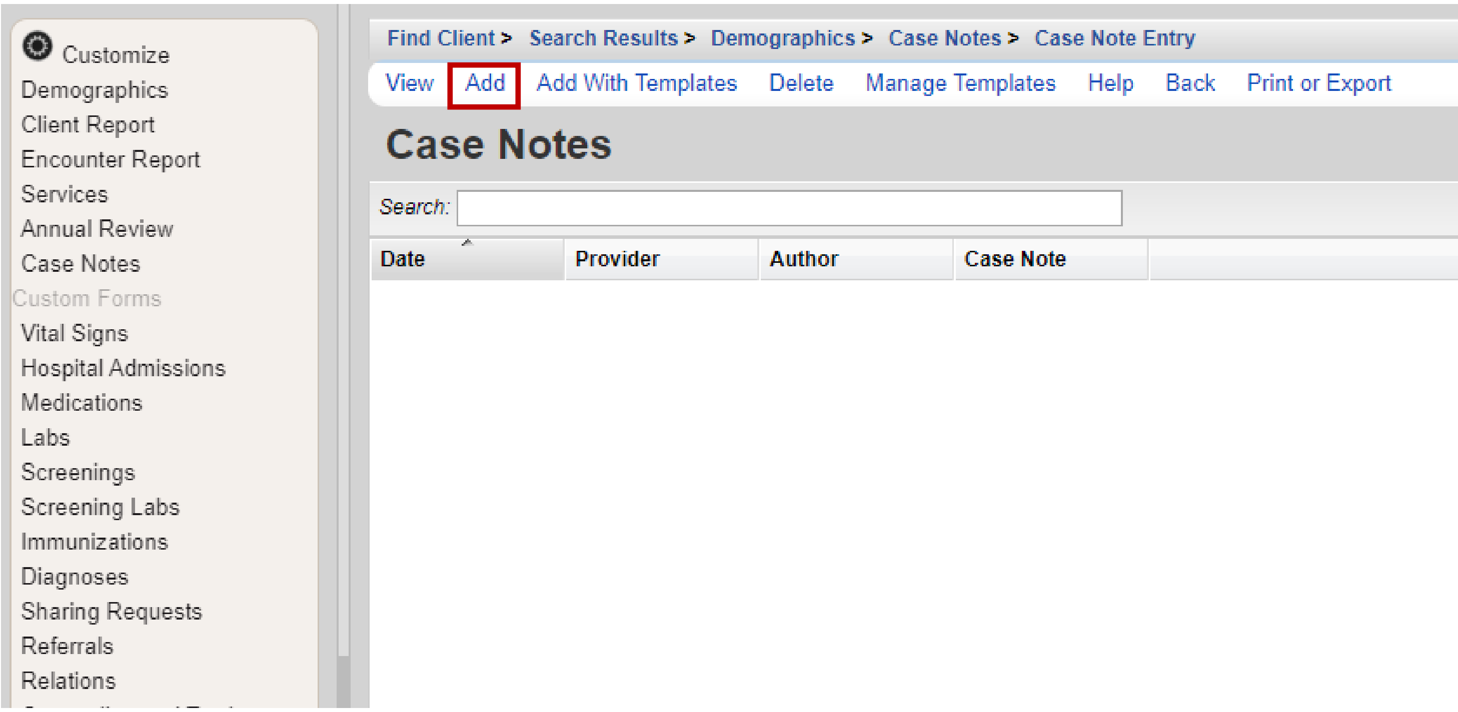


3. Select **Case Note Entry.**



Case Notes Continued

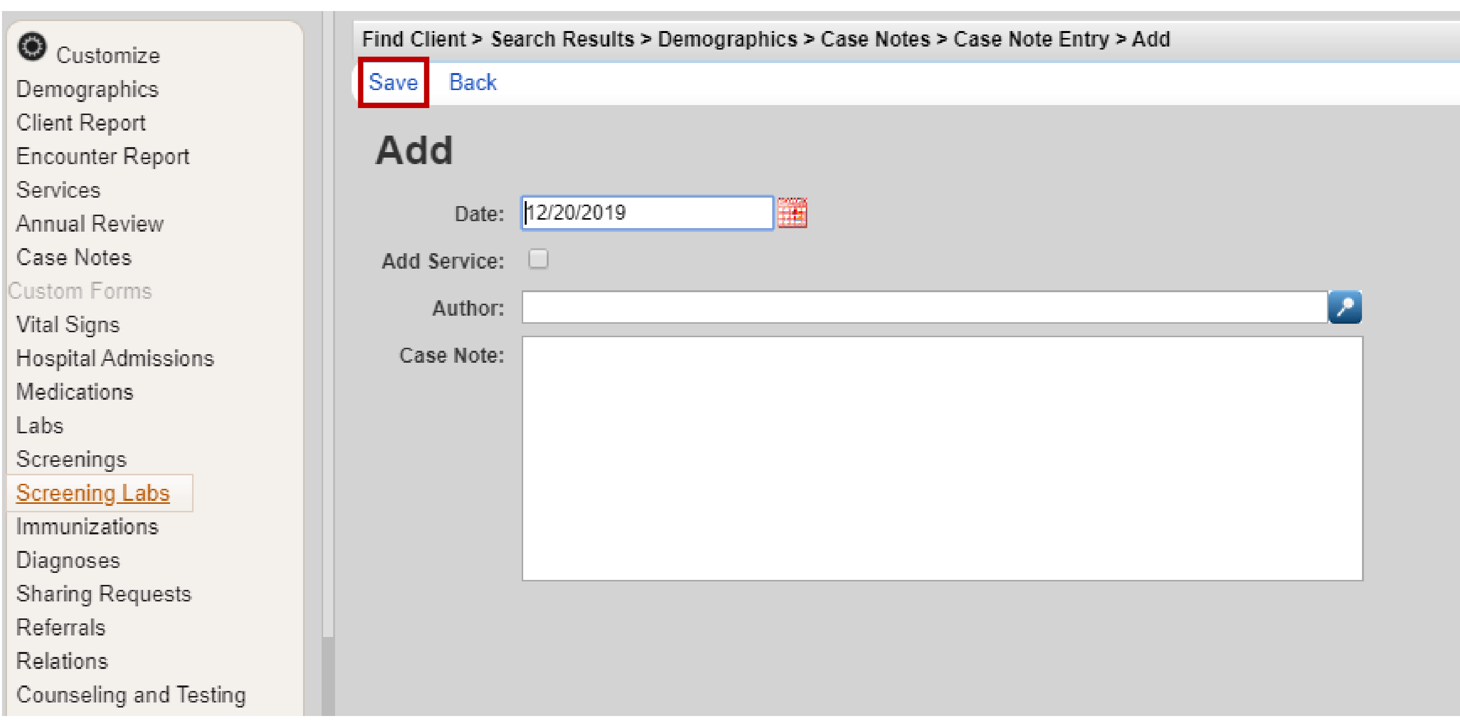
4. Select **Add.**



5. Enter the **Date** of service and **Author** name (if applicable).

6. Enter **Case Note.**

7. **Save.**

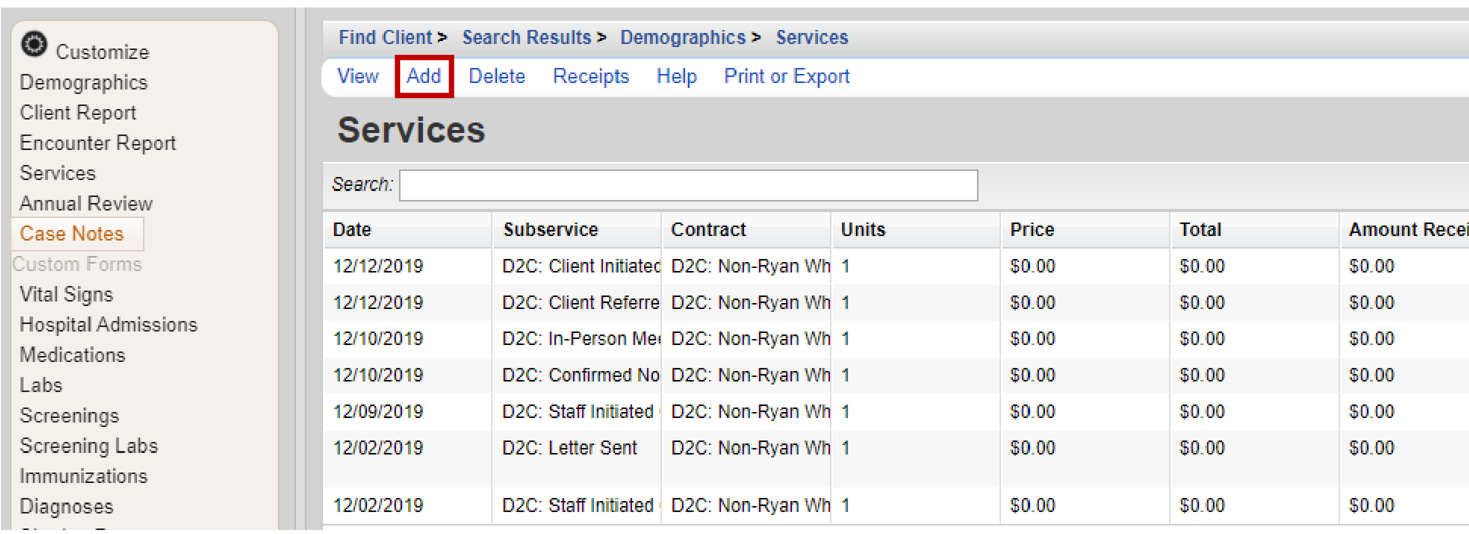


Note: If you select the **Add Service** box, you will be directed to the services tab where you can enter the service for the client. This is a short cut to adding a service.

How To Add a Service

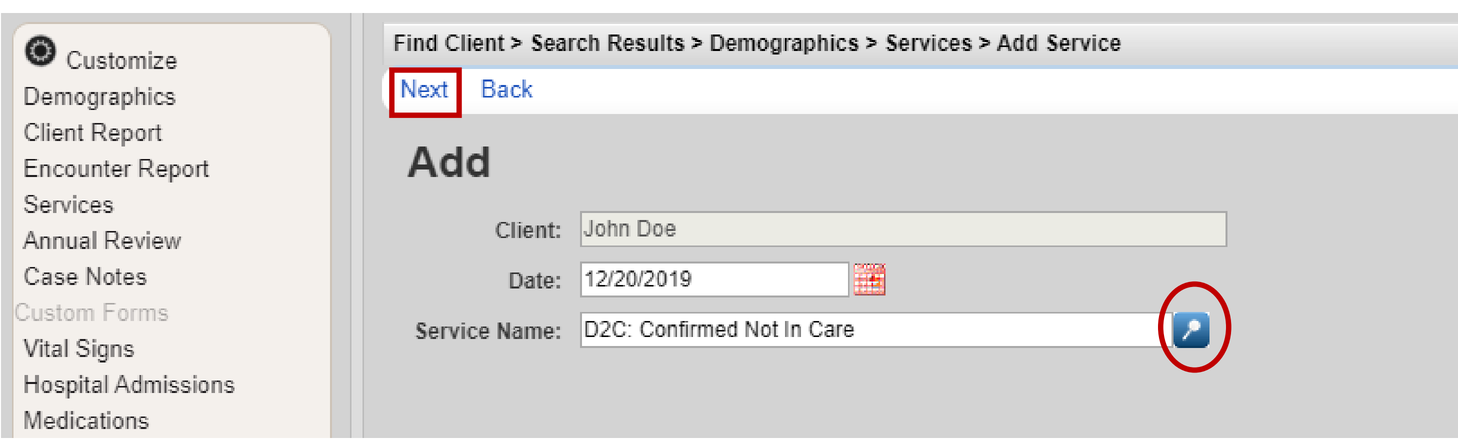
1. Open a client record. Select the **Services** tab from the menu of links on the left-hand side of the client record.

2. Select **Add.**



3.Enter the **Date** the service was provided and select the **Service Name** from the subservice drop down list.

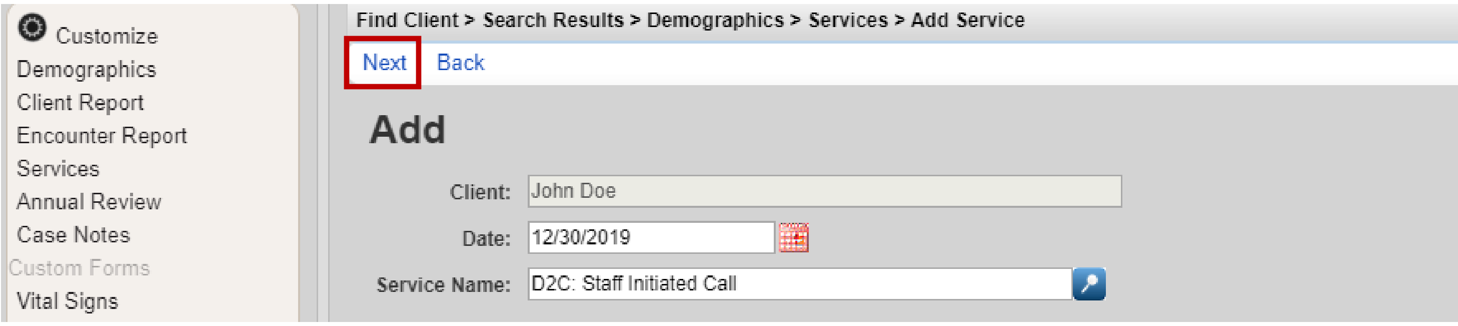
4. Click **NEXT**



Note: You cannot scroll through the drop down menu. Therefore, if you need to add a service that doesn't immediately appear when you click the drop down menu, enter the first couple of letters in the search box. From there, you can select the correct service. As a reference, please refer to page __________

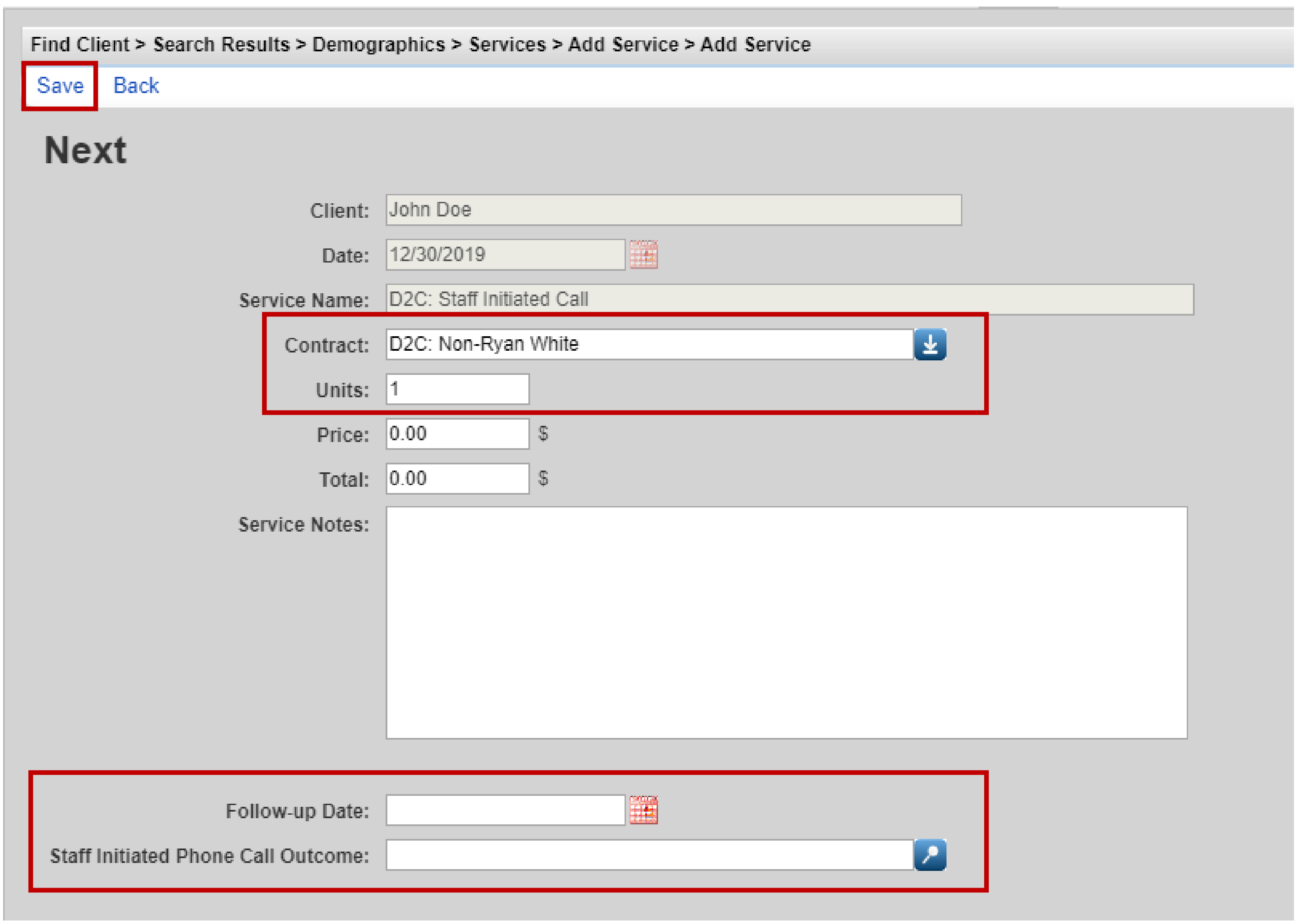
How To Add a Service Continued….

4. Once you enter the date and service, click **Next.** This will take you to the next phase of adding a service.



5. Enter the correct **Contract** and **Units.**

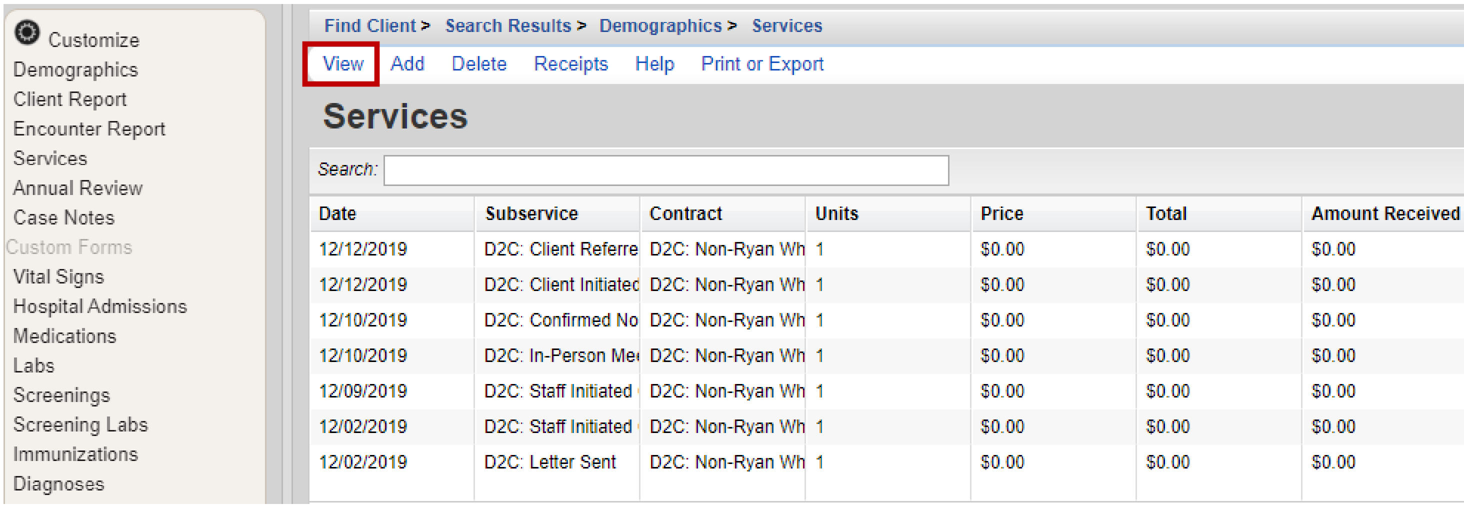
6. **Save.**

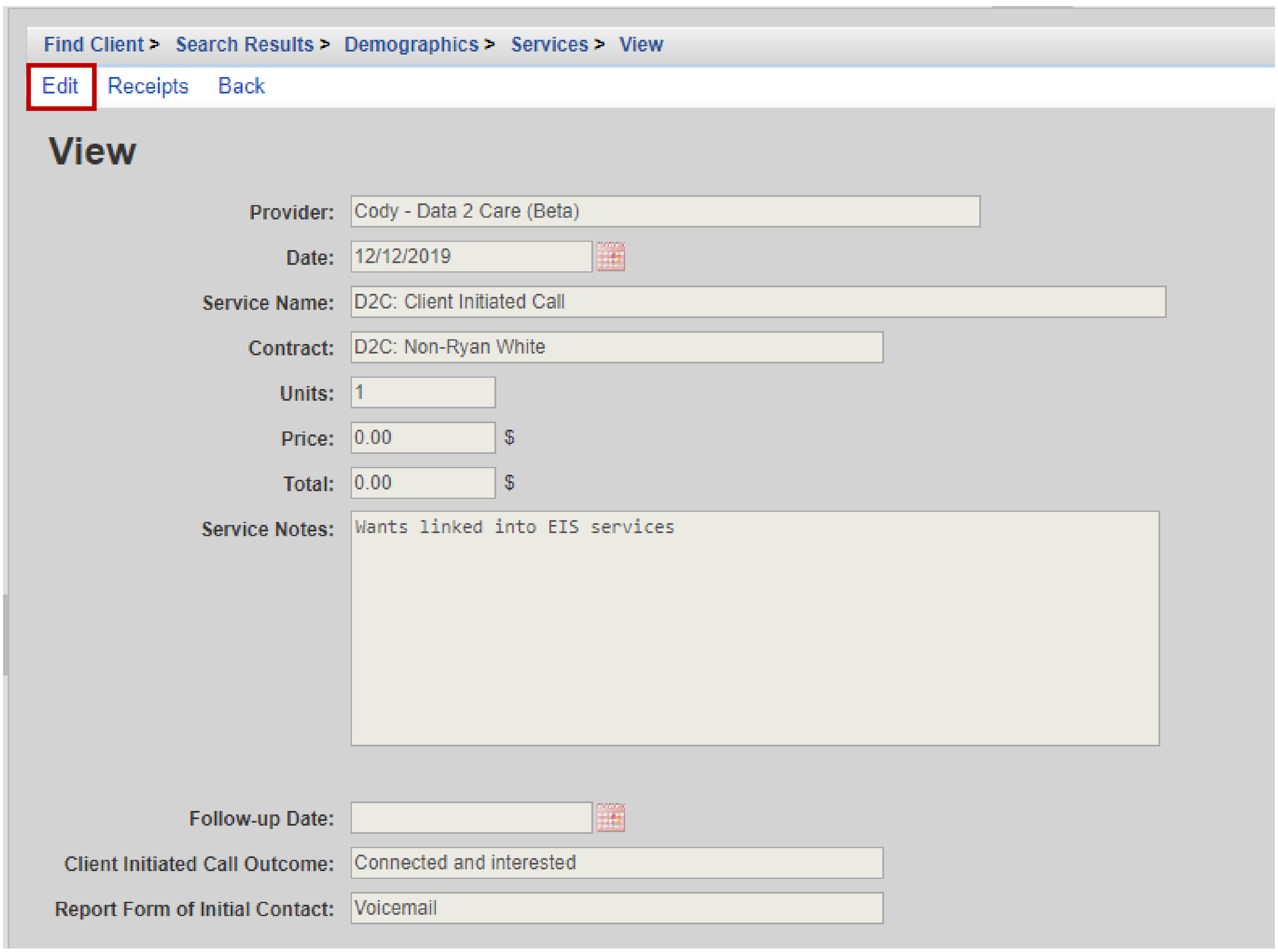


- Follow-Up Date can be used to enter a date as a reminder to when you need to follow up with this client. You can run a custom report for Follow-Up Dates for your own records.
- The Outcome line will be different depending on which Service you choose. Each service will have a drop down list of what possible outcomes there are. Please refer to page ____________ which has all of the Services and associated Outcomes.

How To Add a Service Continued….

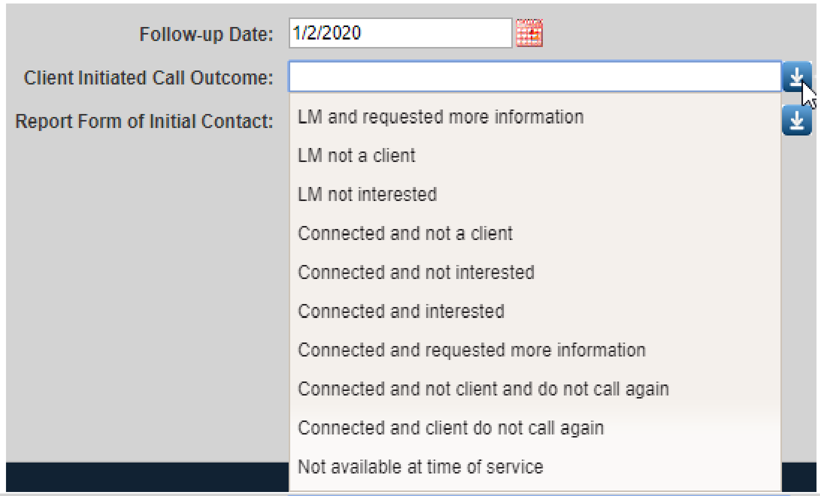
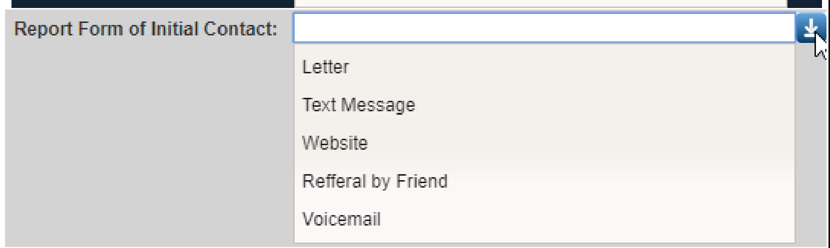
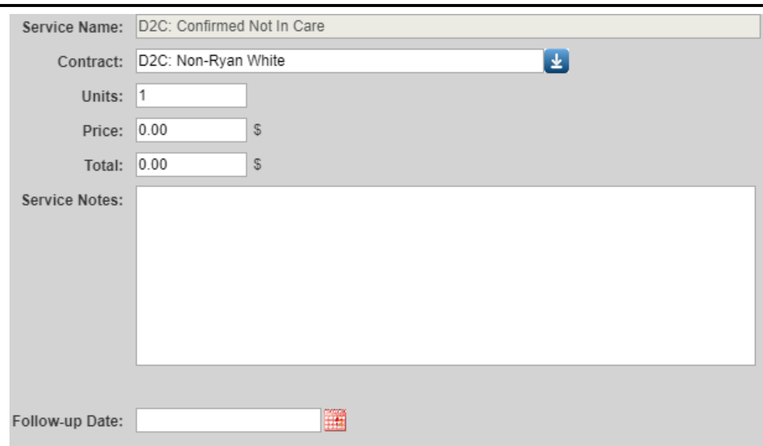
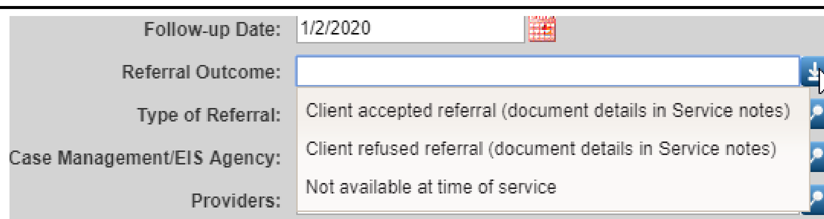
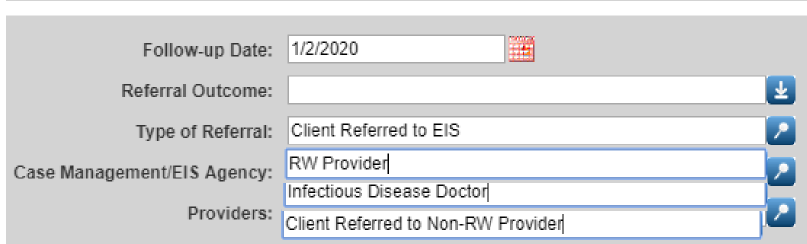
7. If you need to edit a service, select the service that needs editing and then click **View**. From there, you can edit the service by selecting **Edit.**





8. **Save.**

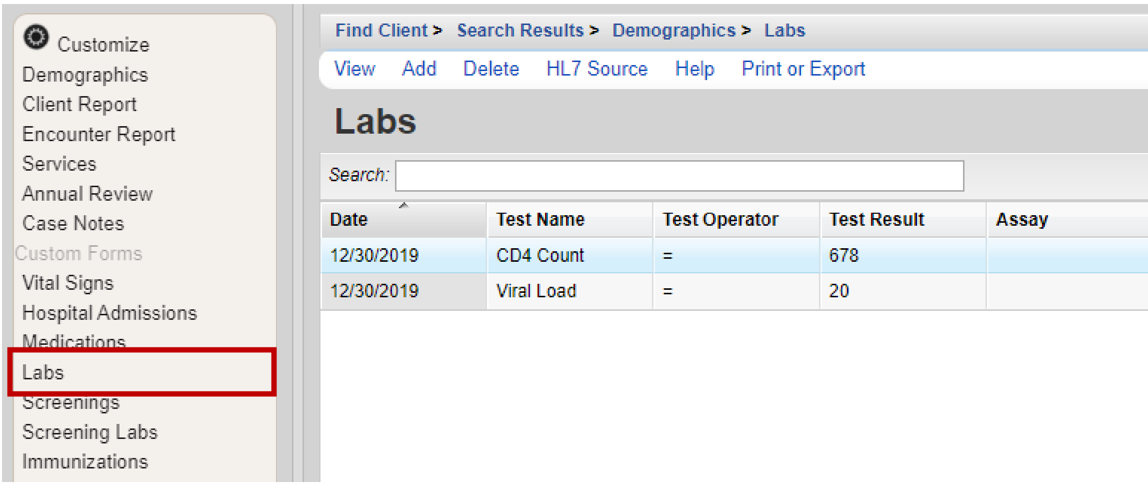
List of Services, Outcomes and Units

SERVICE	OUTCOME	TIME or Units
Client Initiated Call If a client calls record the outcome of that call and then record why they called. Did they call because they received a letter? If so, choose letter from the drop down in the Report Form of initial contact.	 	If there is time spent talking with the client, record the amount of time in Units. 1 unit= 15 minutes
D2C Confirmed Not In Care If you can get into contact with a client and confirm that they are not in care, make sure you are utilizing this service.		Record this as One Unit.
Client Referred If a client is referred record whether they attended. If you do not know at the time of referral if they attended, choose Not available at time of service. When there is an outcome then this field can be updated. On this screen record the type of referral.	  	Record the amount of time in minutes spent on making the referral. 1 unit=15 minutes

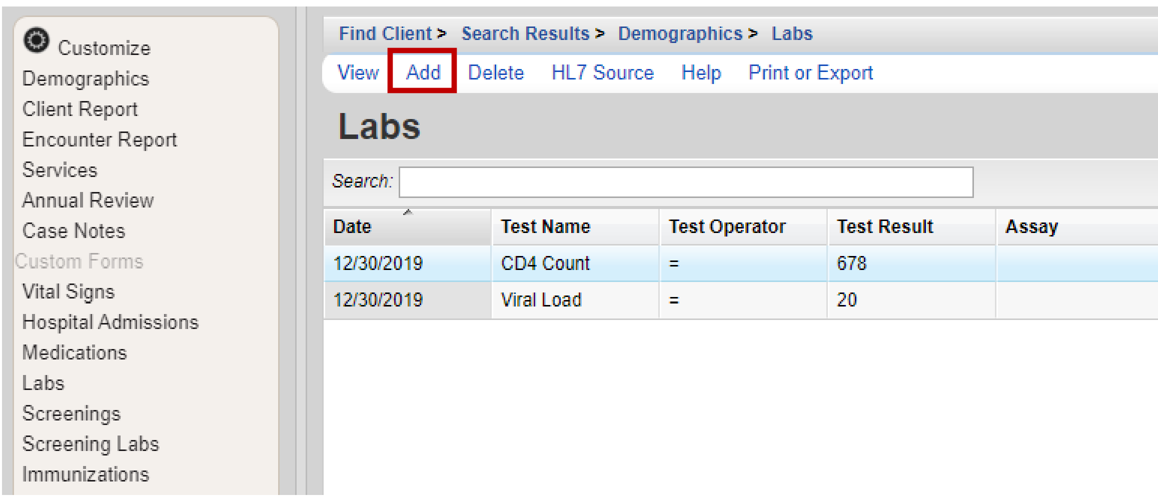
Email sent Record emails sent. Record in **Service Notes** the email address. Record the outcome of the email including if the message was returned undeliverable.	Email Outcome: Client responded to email requested phone call Client responded to email declined service Client responded to email requested more information Client responded to email requested in person meeting Undeliverable Not available at time of service	Record each email as one unit.
In person Meet-up	In-Person Meet-up Outcome: Meet with person (document details in Service notes) No show Not available at time of service	Record the amount of time in minutes spent with the client. 1 unit=15 minutes
Staff initiated Call	Staff Initiated Phone Call Outcome: Client accepted service Disconnected Not a working number No answer, kept ringing Left message Phone belongs to Family/friend that answered (Left message) Phone # does not belong to client Family phone, left message Family/friend indicated client is deceased Call back Client is interested in services, call back	Record each phone call as one unit, but if time is spent communicating with the client record time 1 unit =-15 min...
Text message Received	Text Message Outcome: Sent text message Message returned as undeliverable Not client's number Client responded to message to continue conversation Client responded, but would prefer to have a call Not available at time of service	Record each text message received, but if time is spent communicating with the client record time 1 unit =-15 min..
Text Message sent	Text Message Sent Outcome: Undeliverable Not available at time of service Unable to determine at this time	Record each text message sent, but if time is spent communicating with the client record time 1 unit =-15 min..

How To Add/View a Lab

1. Open a client record. Select **Labs** or **Screening Labs** from the menu of links on the left-hand side of the client record. Each is a different tab, but the information is entered the same way.

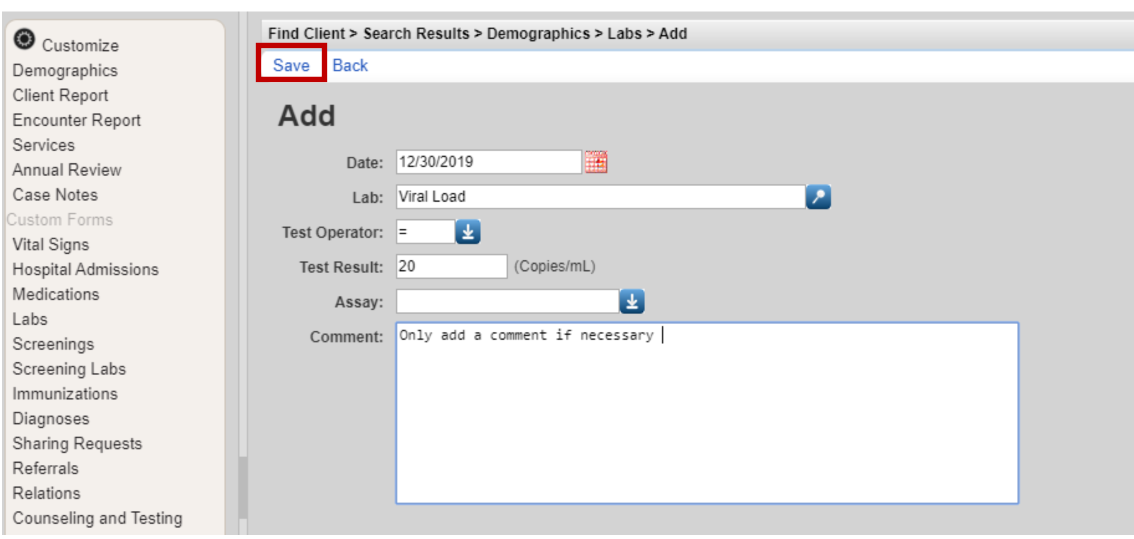


2. Click **Add.**



3. Under the drop down menu, select the appropriate **lab, test operator**, and the **result.**

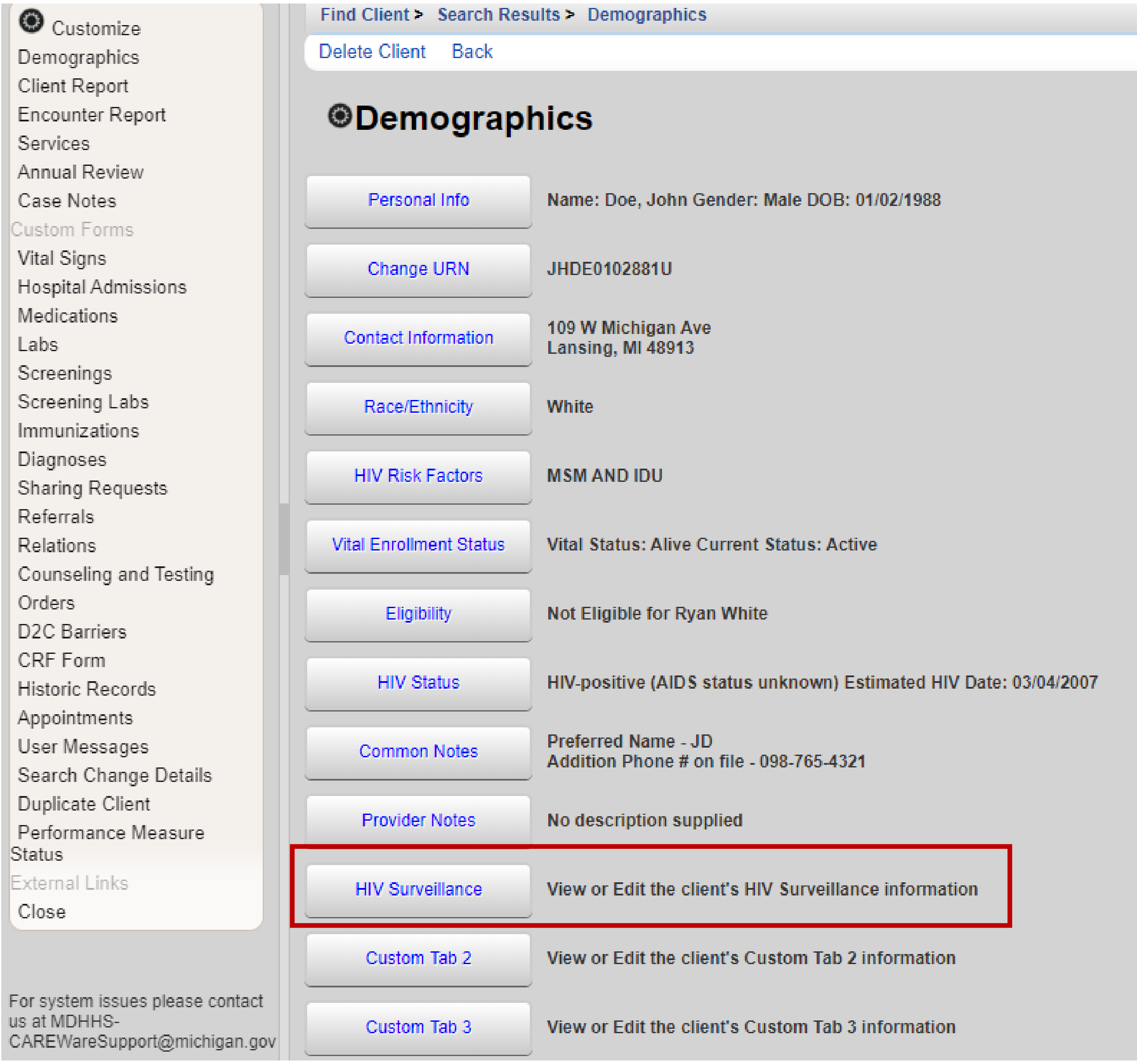
4. **Save.**



Note: You cannot scroll through the drop down menu. In order to access the necessary lab, type in the first couple of letters of the lab in the search box.

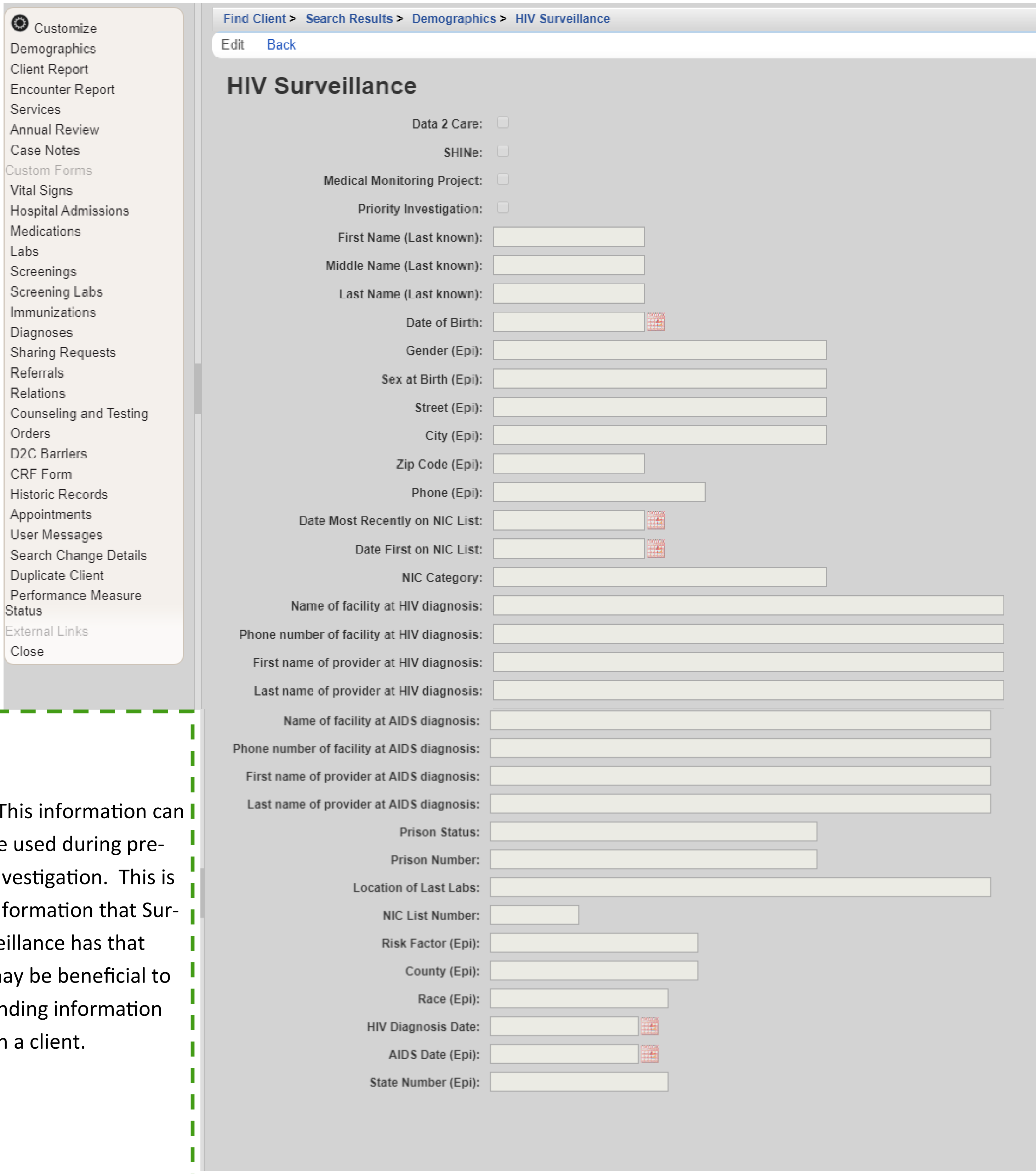
HIV SURVEILLANCE

1. Click the **HIV Surveillance** tab on the demographics page.



HIV SURVEILLANCE CONTINUED

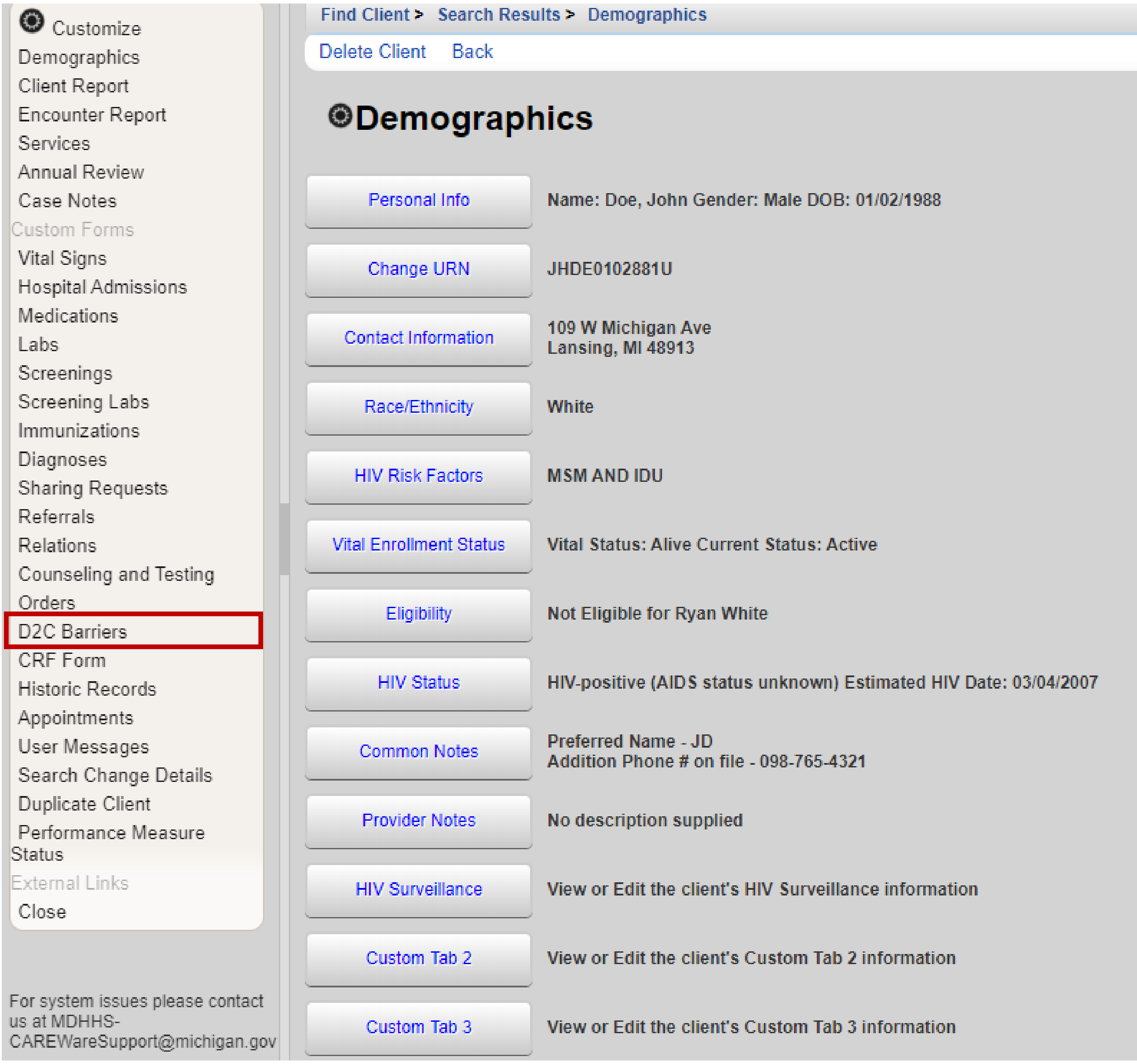
2. Once in HIV Surveillance page, you will see the following information imported from HIV Surveillance team.



*This information can be used during pre-investigation. This is information that Surveillance has that may be beneficial to finding information on a client.

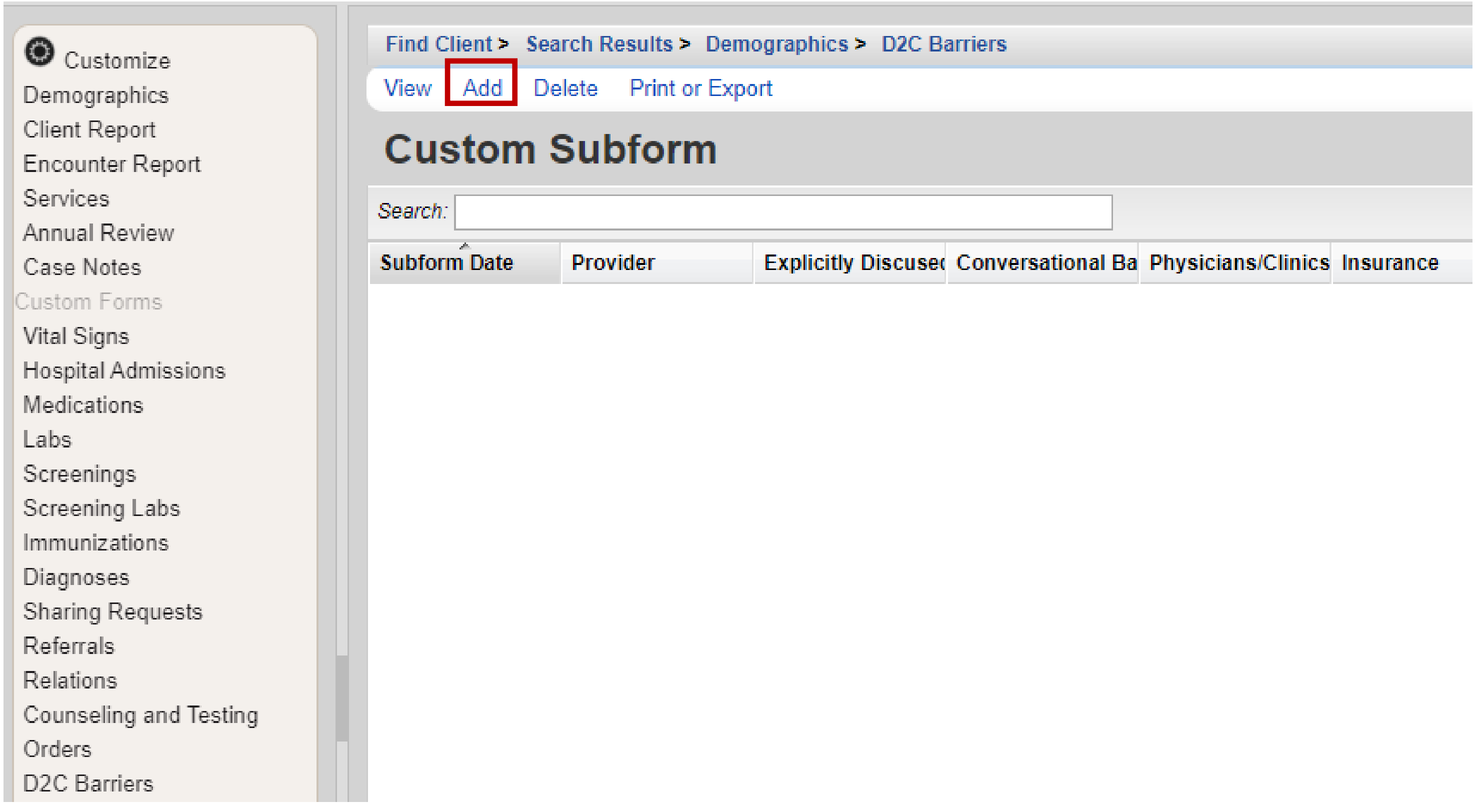
D2C Barriers

1. Select the **D2C Barriers** option from the menu on the left hand side



D2C Barriers

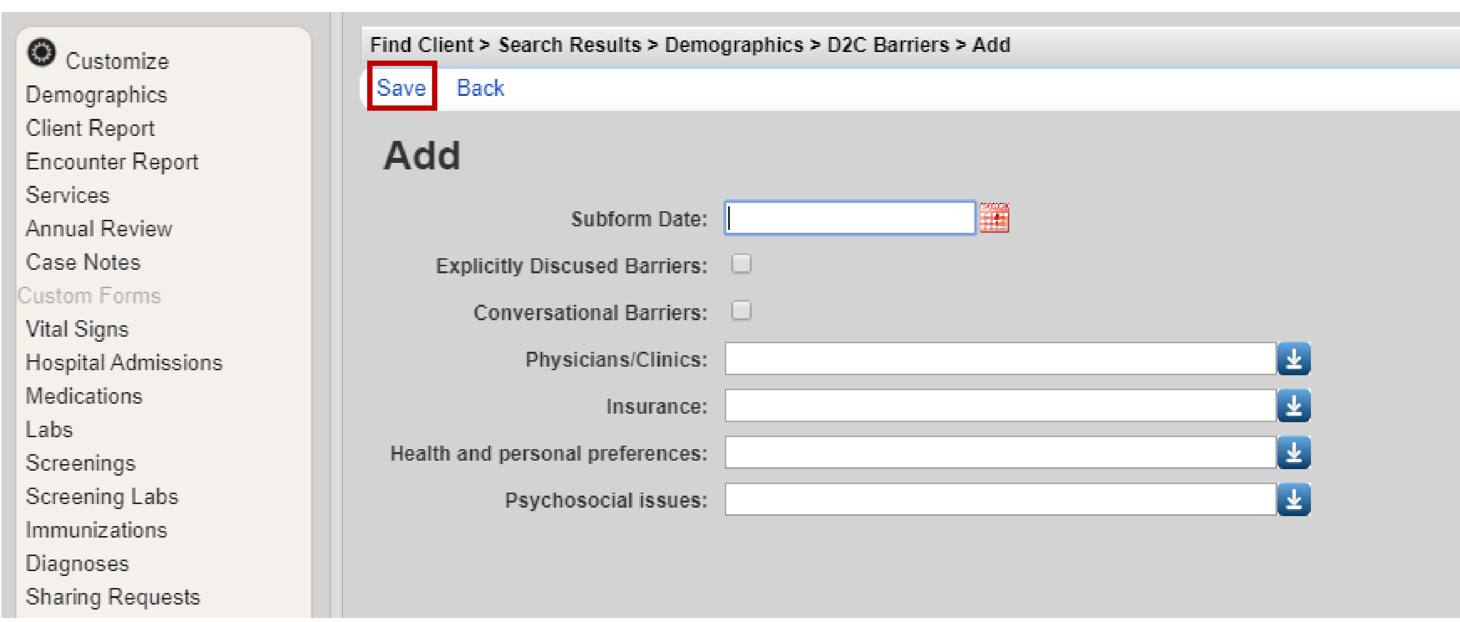
2. Select **Add** to add new barriers



3. Select correct date

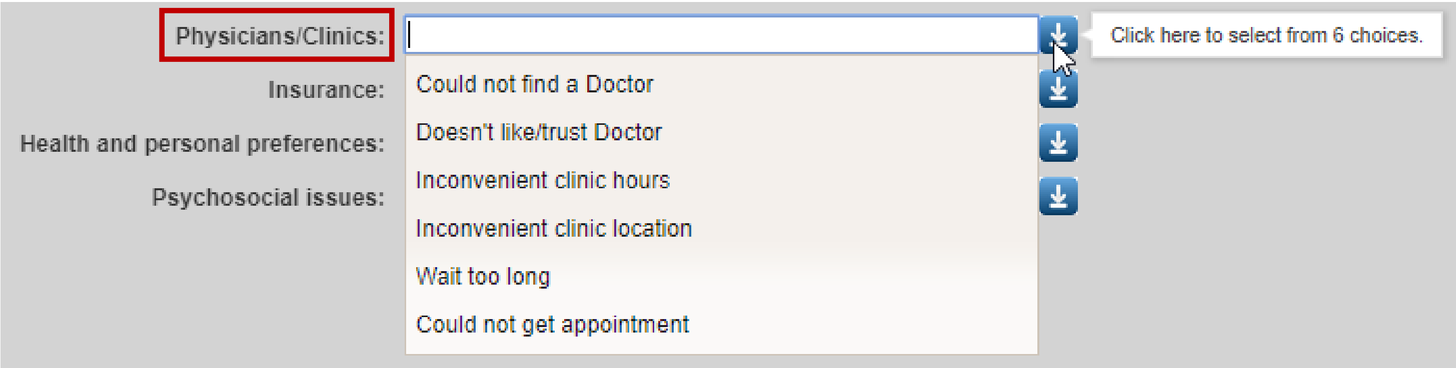
4. Select whether barriers were **Explicitly Discussed** or **Conversational**

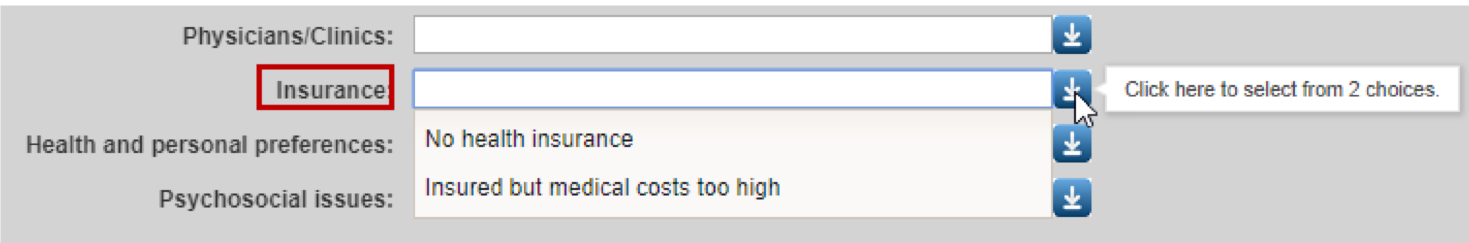
5. Select an option from each dropdown is applicable

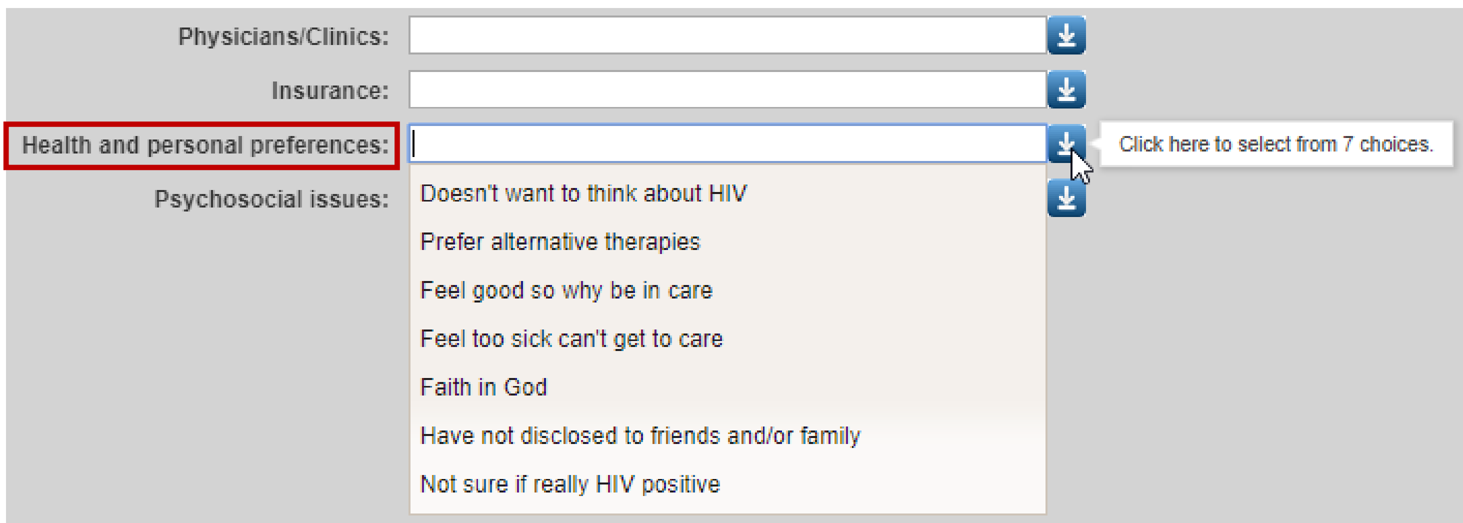


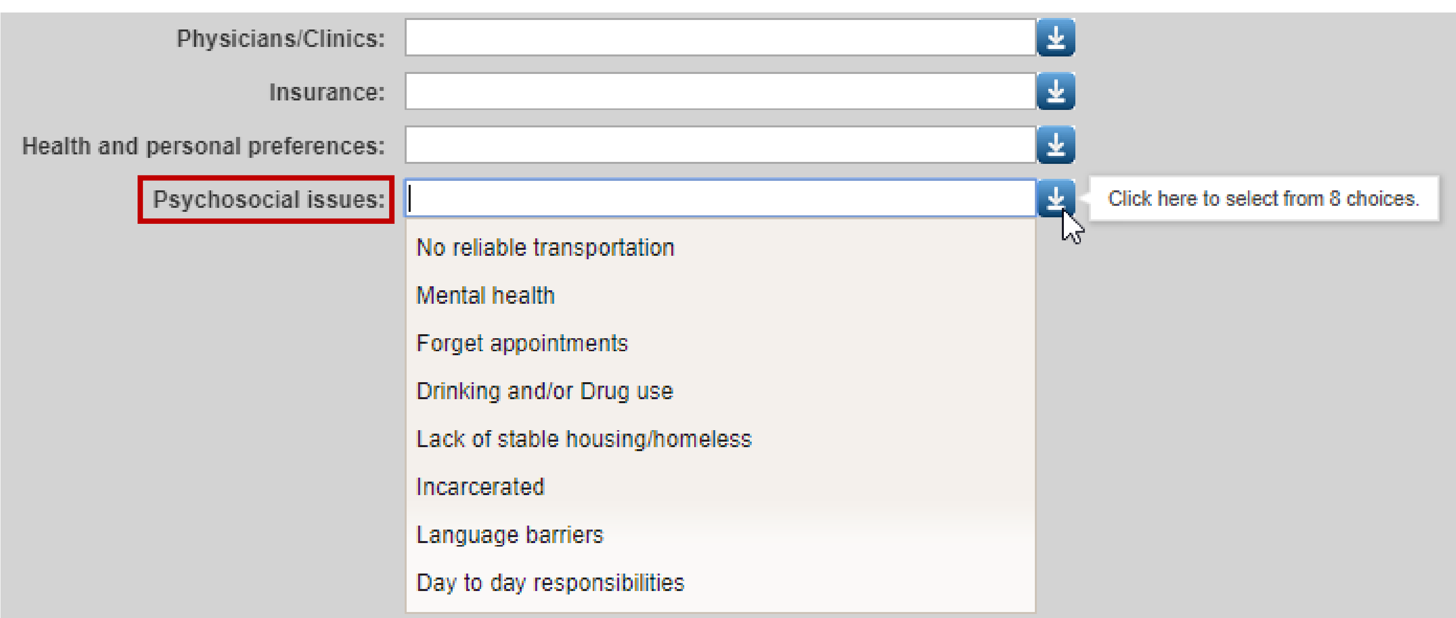
NOTE: You will only be able to choose one option from each drop down box at a time. IF you need to select more than one option from a single drop down, save the first one and repeat steps 2 - 5.

D2C Barriers Dropdown Options



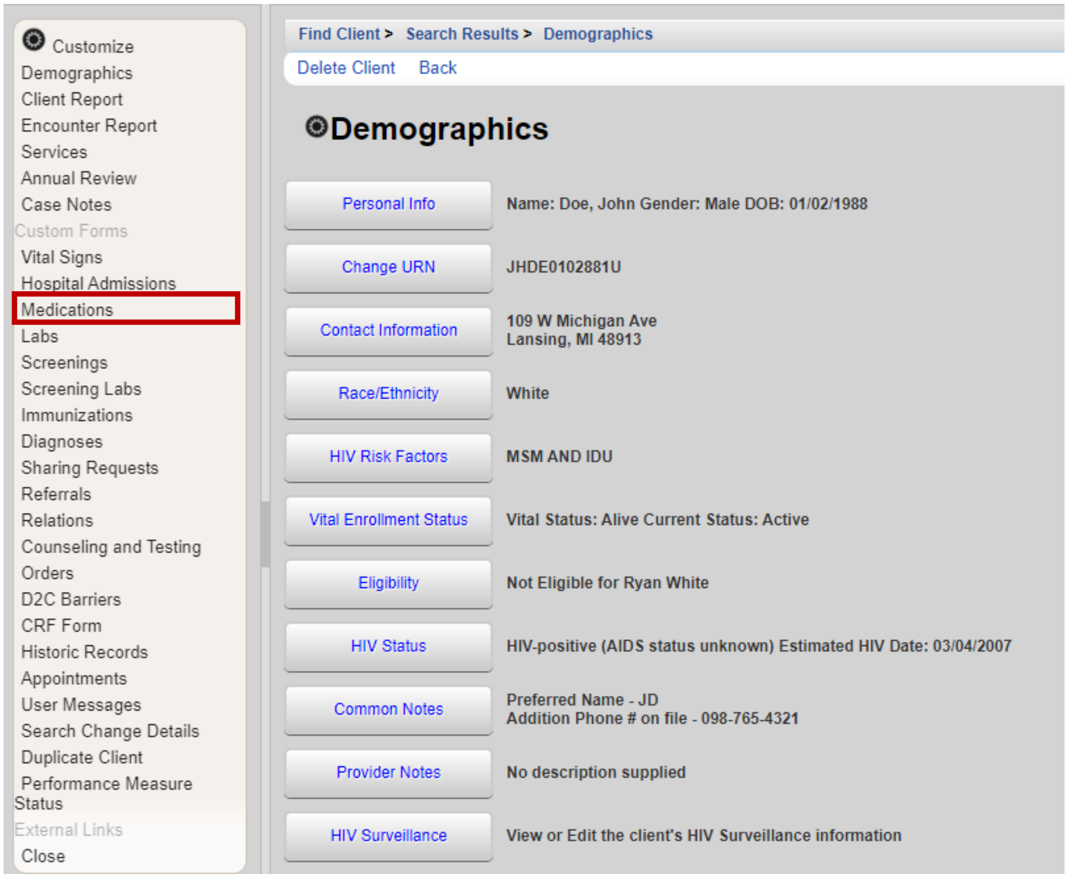






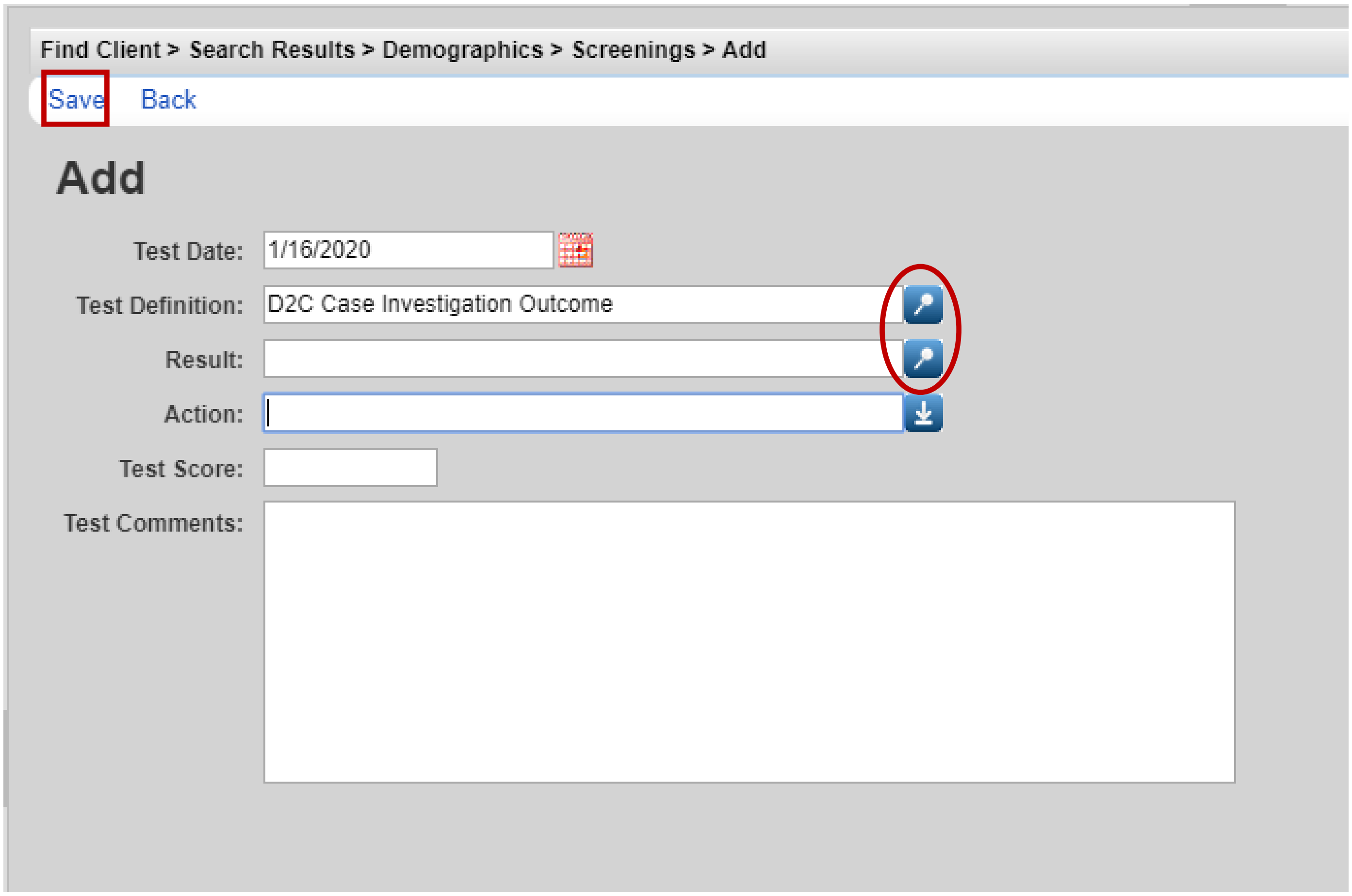
Case Investigation Outcome

1. Click **Screenings**



2. Select **Add**

Case Investigation Outcome Continued



3. Make sure you have the correct date of the Case-Investigation Outcome

4. Select **D2C Case Investigation Outcome** from the dropdown box on the **Test Definition** line

5. Choose the Case Investigation Outcome from the **Results** line (List of Outcomes and definitions are on the next page)

6. Please enter in the comment box with an explanation of the disposition

7. Be sure to click **Save** on the menu bar when completed

Case Investigation Outcome Definitions

Accepted Linkage to Care Services – Linked to Care

A client verbally gives the contact at the LHD permission to be linked to either an EIS provider or medical provider by the LHD.

Data Error

To be used when there is a duplicate record for someone with a misspelled name or incorrect demographic information – Determined by contacting the individual, through TLO, and should only be used after consultation with Jacob Watson.

Deceased

Determined through contact with a family member or through TLO.

Declined Linkage to Care Services

Even in the case of a no, LS should ensure that the individual knows that they can always initiate contact back to the LHD at any time, should they change their mind.

In Care

Can be determined by:

CAREWare services documented from a provider:

-Services must be verified by a call to that provider from the LS

- Client self-report

-Every effort should be made to get details from client about where they are attending care, and the LS should follow up with that provider and MDHHS Surveillance to determine why labs are missing from the record

-If client does not disclose where they are receiving care, a follow up call should be made in the next few weeks to determine if they are willing to discuss where care is received.

In cases where the LS cannot verify the clients self-report of in care with a qualified provider, the LS should verify by researching Labs and/or pharmacy data. If lab and pharmacy data cannot confirm care, the case is dispositioned as “not in care” but noted that client reports an “in care” status; but care cannot be verified.

Do Not Ever Contact Again

This should be used when requested that they are never called again and requests that their information is removed from the contact list indefinitely. This will need to be documented and sent back to MDHHS Surveillance, so their contact information will never reappear on the NIC list. A no is dispositioned in CW as **Declined Linkage to Care Services**. Even in the case of a no or a do not contact again, LS should ensure that the individual knows that they can always initiate contact back to the LHD at any time, should they change their mind.

Institutionalized

Can be reported by a family member or person close to the individual (neighbor, former partner, etc.). As much information, as politely possible, should be collected about location and length of incarceration. If the person is determined to be in a Michigan prison, the information should be verified with UNIFIED, the HIV case management and reentry referral service. A Unified case manager can investigate the prison locating system. If the individual is incarcerated in Michigan, the LS will work with the UNIFIED's case manager to ensure the individual is re-enrolled in HIV care. If the individual is in a county jail, please contact Project Coordinator for technical assistance.

Not Positive

Can be determined by:

1. Client self-report
   -Every effort should be made to get details from client about where and when they tested negative, and then LS should follow up with MDHHS Surveillance and the provider to try and get copy of negative labs
   -If client does not disclose where they tested negative, a CRF should be completed so MDHHS Surveil lance can investigate
   -In cases where care cannot be verified, case is still dispositioned as "positive", but noted that it is not verified by client.

2. CAREWare documentation as negative from another provider
   -Verified by a call to that provider and documented by the LS or other designated HD staff.

Likely Does Not Exist

Proof of identity is not required to take an HIV test. Anecdotally, the LHD knows that many people, particularly in the 1980's and 1990's tested under alias names and date of birth. Records will be closed out as "Likely does not exist" should a person have ALL OF THE ABOVE:

1. No address or letters returned from the individuals known addresses.

2. No phone number or the only known phone number is disconnected or does not belong to the individual.

3. No information available after exhausting all other avenues including TLO, any other local, state surveillance databases, health department records, or clinical records.

Unable to Locate

Individuals will be closed out as "unable to locate" should they:

1. Have no working phone number, which include:
   -All Phone numbers provided by MDHHS
   -All phone numbers with over 60% match likelihood from TLO
   -Contact is attempted for each disconnected phone number a minimum of three to four times, In the event the number has been reconnected.

2. No known address OR letters returned from all possible addresses
   -This may also Include phone calls received informing LS that the individual does not live at the indicat ed address.

3. Unable to locate must not be used unless the LHD explores **all database/resource** options and perform due diligence to ensure that every avenue has been explored to obtain contact in

4. Formation for every individual on the NIC list.

Moved out of State

Individuals will be closed out as “moved out of state” should:

1. The LHD staff receives a call from a household member stating the individual moved out of state
2. TLO shows only out of state addresses for a minimum 2 recent years
3. The individual tells the LHD staff they live out of state

   -In the case the LS speaks to the individual, they will inquire about HIV care and if they were able to transfer their medical care

   -If the LS does not speak to the individual directly, no follow-up is done to confirm the individual is in care.

4. HIV Surveillance has been consulted to make an out of state call with the surveillance department of the other state in question.

Out of Jurisdiction

Individuals will be closed out as “moved out of Jurisdiction” should:

1. The LHD staff receives a call from a household member stating the individual moved out of the county/jurisdiction or area

2. TLO shows only out of county/jurisdiction or area addresses for a minimum 2 recent years.

3. The individual tells the LHD staff they live out of county/jurisdiction or area.

4. In the case the LS speaks to the individual, they will inquire about HIV care and if they were able to transfer their medical care

   If the LS does not speak to the individual directly, no follow-up is done to confirm the individual is in care.

5. HIV Surveillance has been consulted to make an out of county/jurisdiction or area call with the other county/jurisdiction or area in question.

6. If the client has moved out of the county, please note this in the comments box.

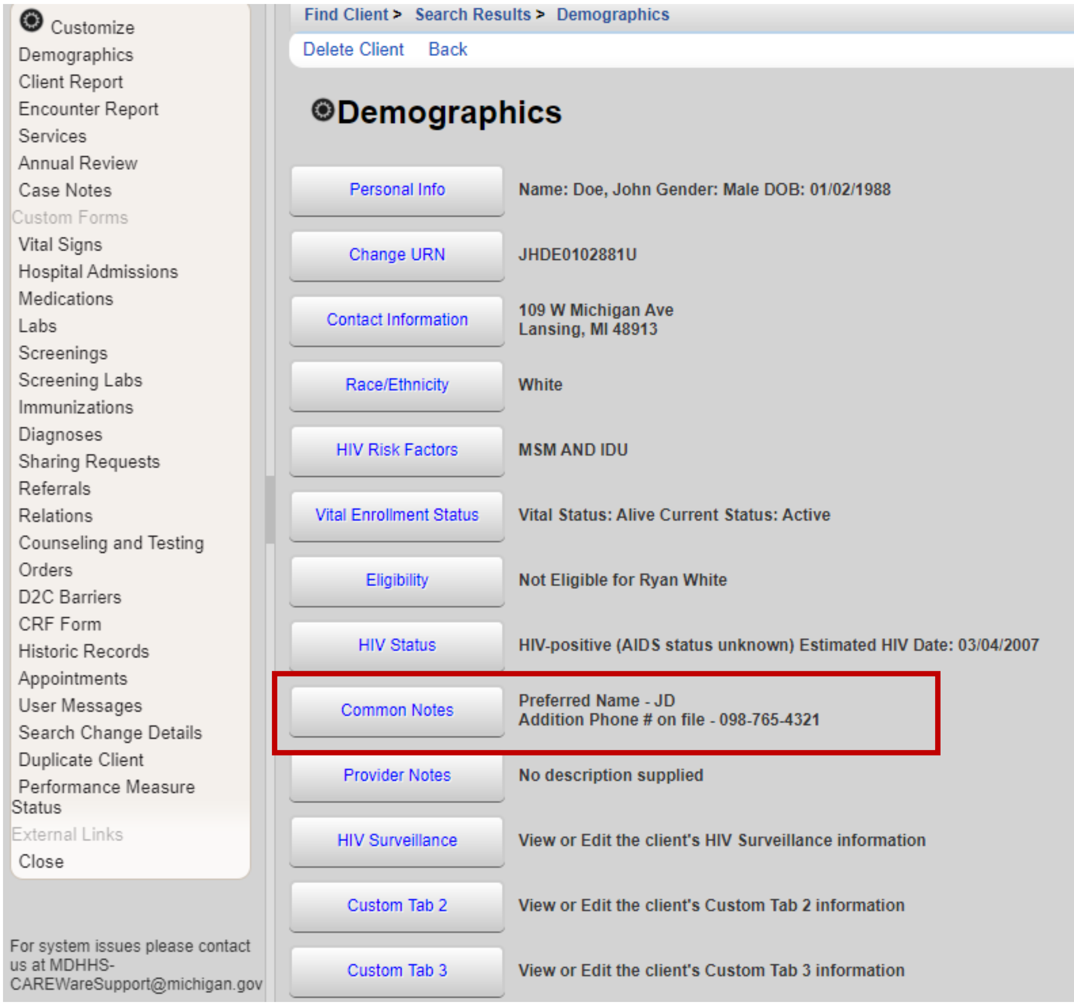
Other

To be used when no other disposition makes sense. **Each time ‘Other’ is chosen, text must be entered to explain the disposition. Example include:**

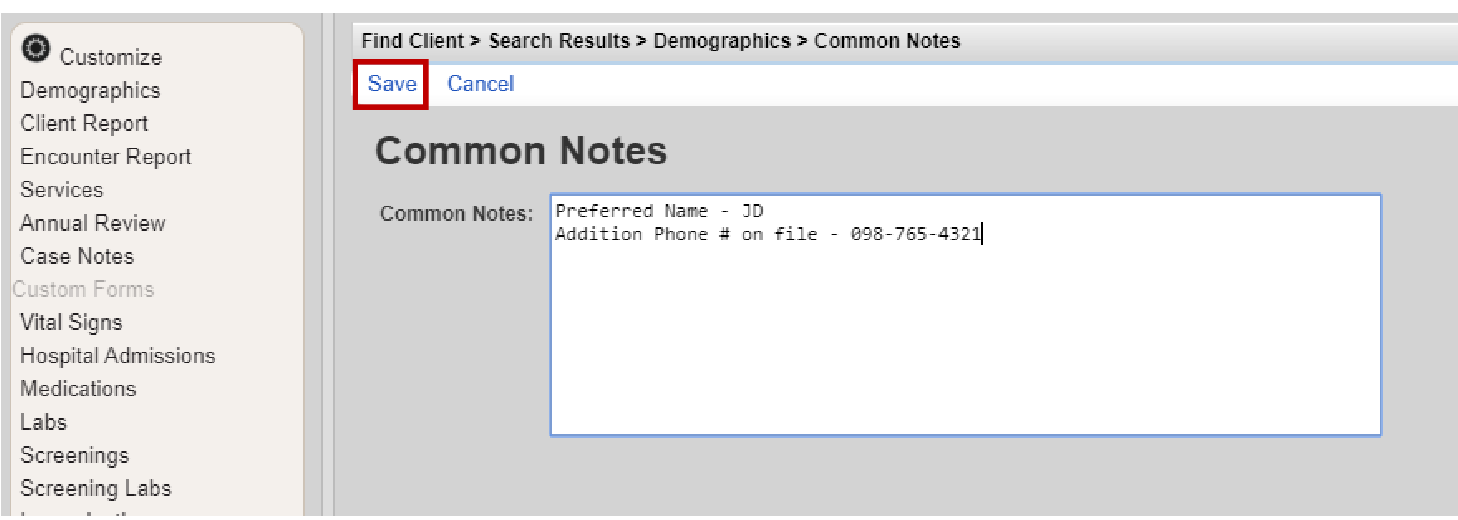
Individual returns call and informs the LHD that they used to test under that name as an alias, and they are in care under their correct name, but do not wish to share their actual name, so care cannot be verified.

Common Notes

1. Click Common Notes

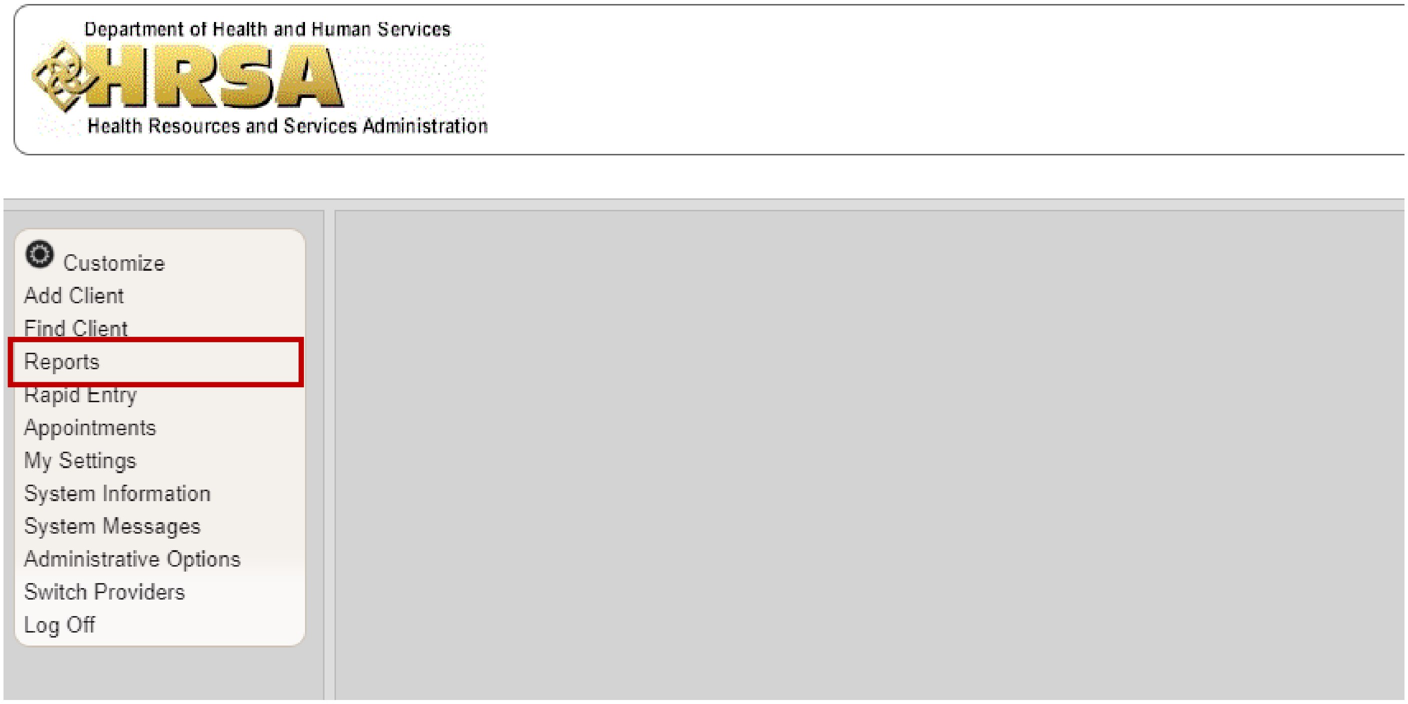


2. Enter any new contact information you have gathered that would be beneficial to contacting/locating client



3. **Save**

Custom Reports

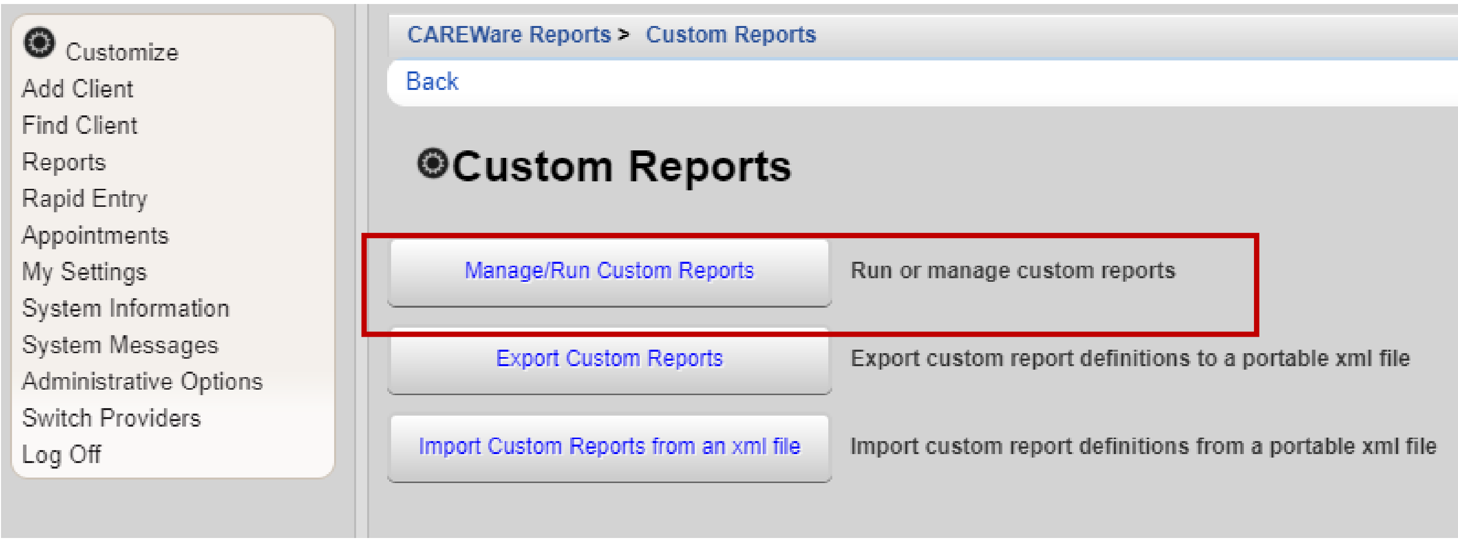


1. Select **Reports**

2. Select Custom Reports once CAREWare Reports page opens

Custom Reports Continued

3. Select **Manage/Run Custom Reports**

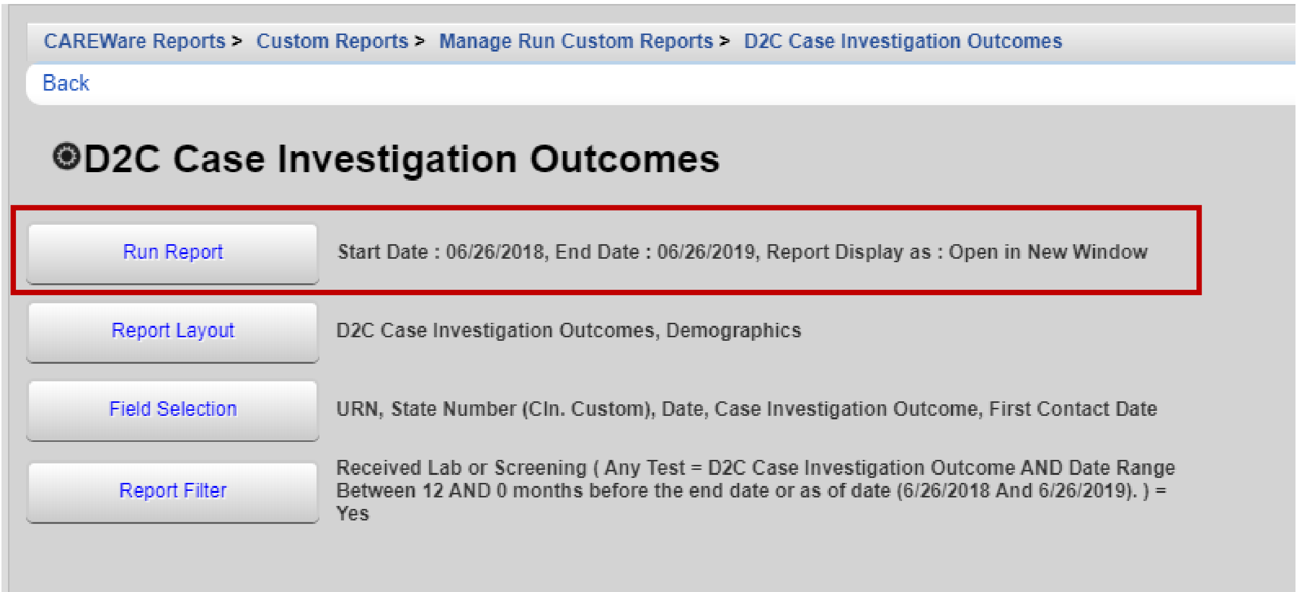


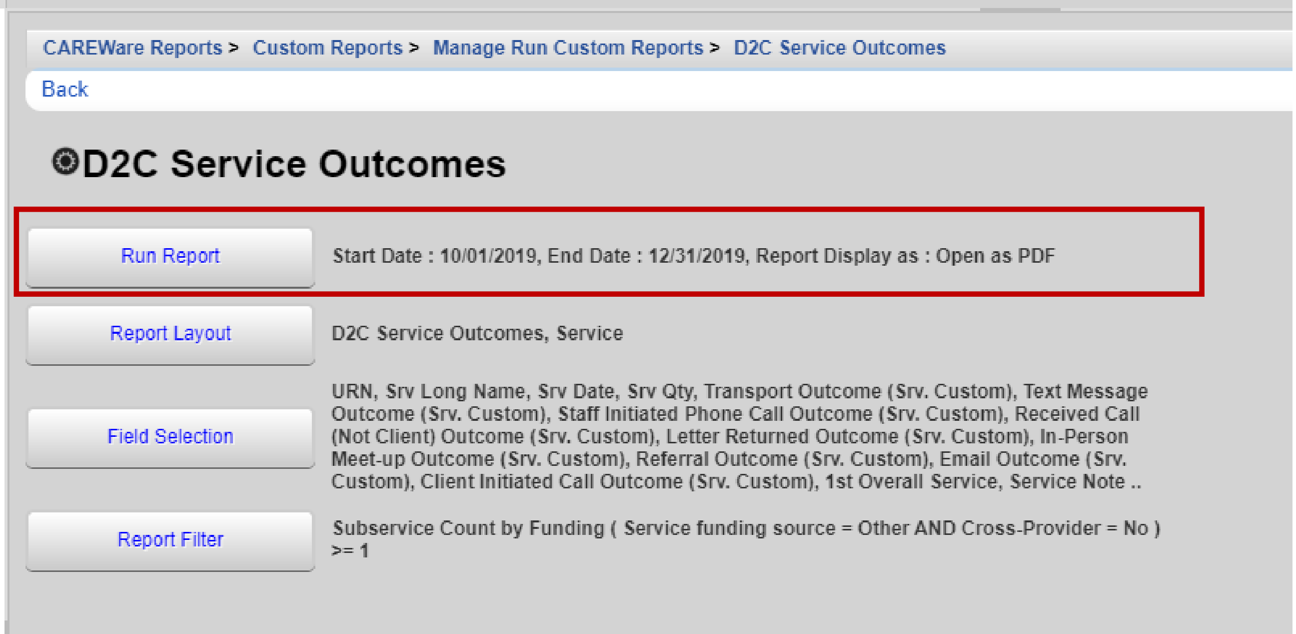
4. Choose the report you are looking to run

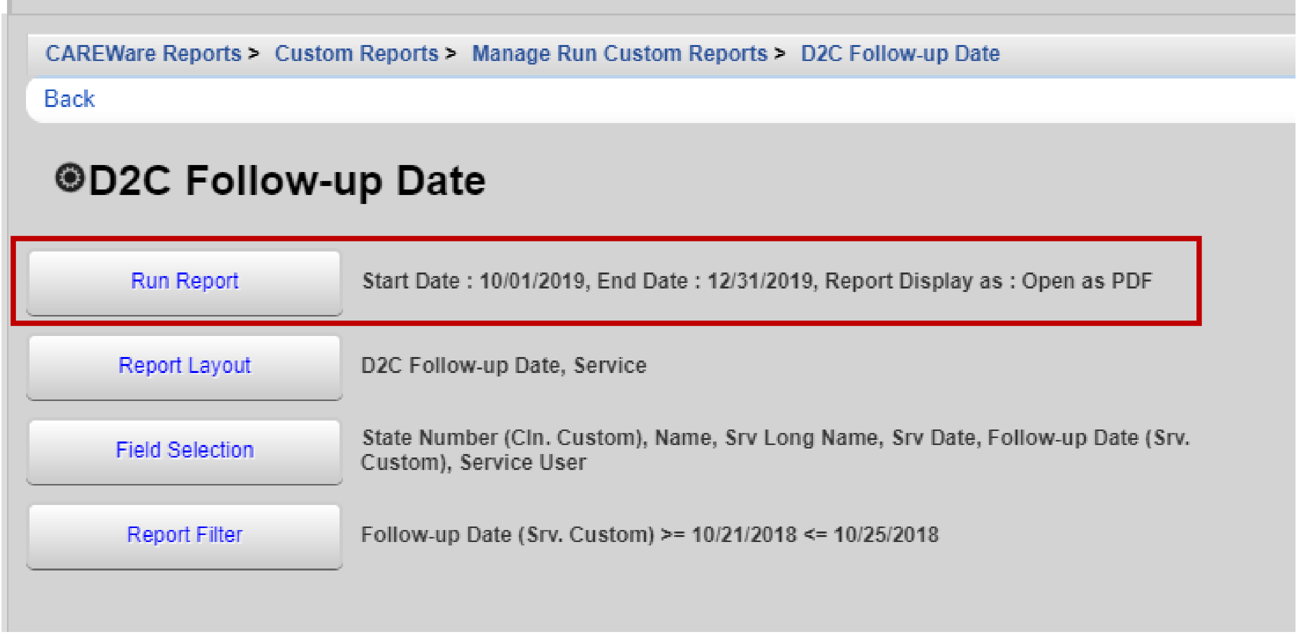
5. Once the report you want is highlighted, click **Manage Run** to run that report

Custom Reports Continued

6. Select **Run Report**







Custom Reports Continued

7. Select **Edit** if you need to change the Date Range or Output Display

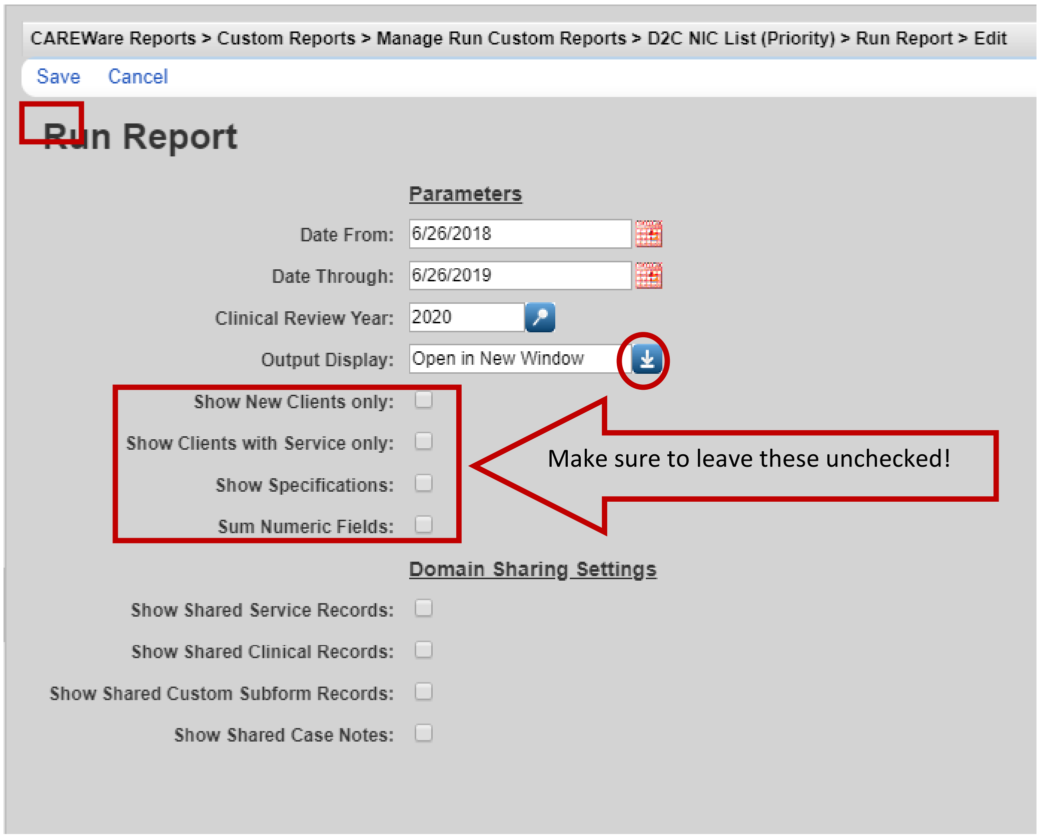
8. Change the Date Range for the time you are looking for

9. Change the Output Display to what you are looking for. Options are:

    A. Open in New Window

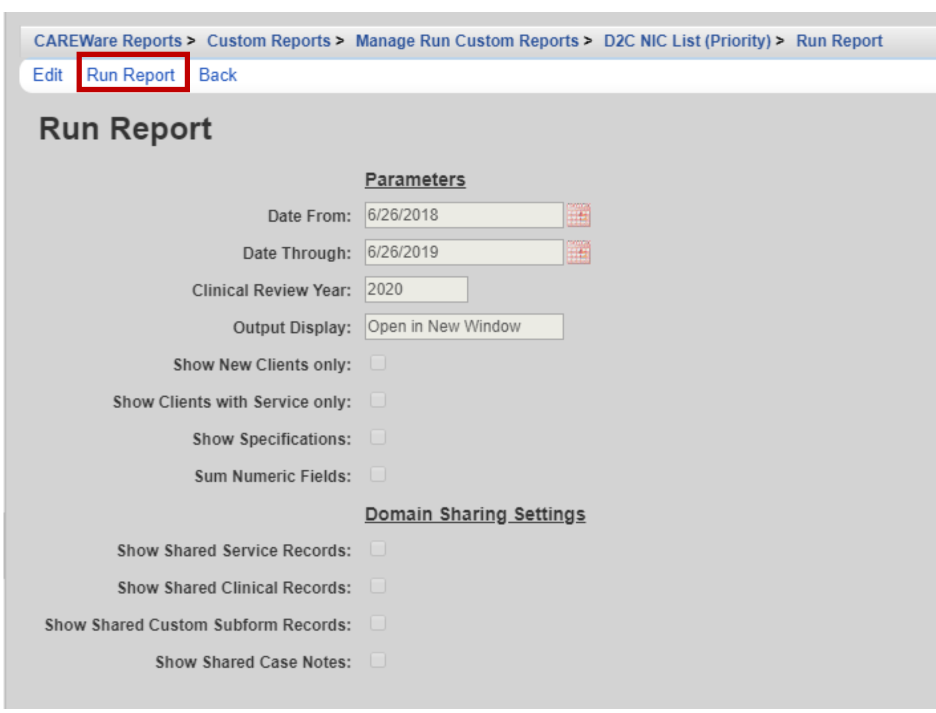
    B. Download as CSV (excel)

    C. Open as PDF



10. **Save**

11. Select **Run Report**



QUESTIONS?

If you have any questions, please email us at **MDHHS-LinkUpMI@michigan.gov**

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If you have any issues with loginning into CAREWare or other issues related directly to CAREWare, please email our CAREWare Team at **MDHHS-CAREWARESUPPORT@michigan.gov**